Invitation to Exhibit at the MSTCVS 2019 Summer Meeting

The Michigan Society of Thoracic and Cardiovascular Surgeons (MSTCVS) would like to invite you to participate in the 2019 MSTCVS Annual Summer Meeting at the Midland Center for the Arts, Midland, MI. This meeting is the premier educational event for Michigan thoracic and cardiovascular surgeons, data managers and perfusionists. For MSTCVS industry partners and related organizations, this event is an unparalleled opportunity to make and solidify relationships through person-to-person communications and marketing. Please consider reserving your booth space today!

Included in your exhibit booth fee

- Booth identification sign
- Unlimited complimentary exhibitor badges
- General maintenance of the aisles and common exhibit hall areas
- Full color ad/logo in the final program
- Discounted exhibitor housing rates
- Dedicated exhibit time each day
- Tickets to attend meal events and Friday evening banquet

Location and Shipping Information (include your name and company name)

Midland Center for the Arts ATTN: Brian Cone / MSTCVS Meeting 1801 West St. Andrews Midland, MI 48640 (989) 631-5930

Exhibit Installation Date & Hours (Midland Center for the Arts – Brick and Red Carpet Lobbies)

The main theater entrance is the closest to the Brick and Red Carpet lobbies for set up and tear down.

Thursday, August 8...... 9:00am - 10:00pm

Cocktail Welcome Reception with Exhibitors (The H Hotel - Indigo Foyer)

Thursday, August 8.....5:00pm - 6:30pm

Exhibit Dates & Hours

Friday, August 9......7:00am - 1:30pm

7am-8am (join us for breakfast); 9:45am – 10:15pm visitation by attendees; 12-1pm (join us for lunch)

Friday, August 9......7:00pm – 10:00pm Presidents' Banquet – Great Lakes Loons Stadium

Saturday, August 10......7:00am - 1:30pm

7am-8am (join us for breakfast); 9:40am – 10:15pm visitation by attendees; 12-1:30pm (join us for lunch)

Exhibit Dismantle Date & Hours

Saturday, August 10.....2:00pm-6:00pm

Booths may be torn down after 2:00pm on Saturday, August 10.

TO SHIP ITEMS OUT, YOU MUST PROVIDE YOUR OWN SHIPPING LABEL

There will be a designated space to put your UPS packages for pickup. If you have FEDEx, you must schedule those pick ups personally.

Exhibitor Fees

LEVEL	Cost	BENEFITS
GOLD	\$5,000	1. GOLD EXHIBITOR CERTIFICATE PRESENTED DURING FRIDAY BANQUET
		2. EXHIBITOR SIGN AT REGISTRATION TABLE WITH NAME & LOGO PROMINENTLY DISPLAYED**
		3. 7.5" X 9", 4-COLOR AD IN FINAL PROGRAM**
		4. FIRST-PRIORITY BOOTH SPACE IN EXHIBIT HALL WITH SIX-FOOT TABLE
		5. UP TO FOUR REPRESENTATIVES (INCLUDES ALL MEALS & EVENING EVENTS)
SILVER	\$3,000	1. EXHIBITOR SIGN AT REGISTRATION TABLE WITH NAME & LOGO PROMINENTLY DISPLAYED**
		2. 4.5" X 7.5", 4-COLOR AD IN FINAL PROGRAM**
		3. SECOND-PRIORITY BOOTH SPACE IN EXHIBIT HALL WITH SIX-FOOT TABLE
		4. UP TO FOUR REPRESENTATIVES (INCLUDES ALL MEALS & EVENING EVENTS)
EXHIBITOR	\$2,000	1. BOOTH SPACE IN EXHIBIT HALL WITH SIX-FOOT TABLE
		2. 3.75" X 4.5", 4-COLOR AD IN FINAL PROGRAM**
		3. TWO REPRESENTATIVES (INCLUDES ALL MEALS & EVENING EVENTS)

^{**} Application, payment and logo/ad must be received by June 28, 2019 to be included in onsite brochure and event website.

Sponsorship Opportunities

OPTION	Cost	BENEFITS
POWERPOINT	\$300	1. TO BE DISPLAYED ON A ROTATING BASES AT THE MSTCVS REGISTRATION DESK MONITOR
SLIDE		2. TO BE DISPLAYED ON A ROTATING BASES IN THE GENERAL SESSION ROOM
		3. UNLIMITED SPONSORSHIPS AVAILABLE
WELCOME	\$2500	1. FULL COLOR SIGNAGE WITH YOUR LOGO PROMINENTLY DISPLAYED AT THE WELCOME RECEPTION
RECEPTION		2. RECOGNITION IN ONSITE BROCHURE AND EVENT WEBSITE**
THURSDAY		3. ANNOUNCED THANK YOU BEFORE THE THURSDAY EVENING GENERAL SESSION.
EVENING		4. ONLY ONE SPONSORSHIP AVAILABLE
FRIDAY OR	\$4000	1. TENT CARDS WITH YOUR COMPANY NAME ON EACH TABLE
SATURDAY		2. RECOGNITION IN ONSITE BROCHURE AND EVENT WEBSITE**
BREAKFASTS		3. FULL COLOR SIGNAGE WITH YOUR COMPANY NAME AND LOGO AT THE ENTRANCE TO BREAKFAST
		4. FULL COLOR SIGNAGE WITH YOUR COMPANY NAME AT THE BUFFET/FOOD TABLES
		5. ANNOUNCED THANK YOU BEFORE OUR MORNING SESSION ON THE SPONSORED DAY
		6. ONLY TWO SPONSORSHIPS AVAILABLE
FRIDAY OR	\$6000	1. 50% OFF 1 SIX-FOOT EXHIBIT TABLE IN EXHIBIT HALL
SATURDAY		2. TENT CARDS WITH YOUR COMPANY NAME ON EACH TABLE
LUNCH		3. RECOGNITION IN ONSITE BROCHURE AND EVENT WEBSITE**
		4. FULL COLOR SIGNAGE WITH YOUR COMPANY NAME AND LOGO AT THE ENTRANCE TO BREAKFAST
		5. FULL COLOR SIGNAGE WITH YOUR COMPANY NAME AT THE BUFFET/FOOD TABLES
		6. ANNOUNCED THANK YOU AFTER OUR MORNING SESSIONS ON THE SPONSORED DAY
		7. ONLY TWO SPONSORSHIPS AVAILABLE
REFRESHMENT	\$1500	1. FULL COLOR SIGNAGE AT THE REFRESHMENT BREAK STATION DURING THE ALLOTTED BREAK TIME
BREAK		2. RECOGNITION IN ON-SITE BROCHURE
LISTED IN	\$1000	1. COMPANY NAME AND LOGO LISTED ON EMAIL INVITATIONS AND PRINTED MAILING INVITATIONS
MARKETING		(PAYMENT, APPLICATION, AND LOGO MUST BE RECEIVED BY 03/29/19)
MATERIAL		2. COMPANY NAME AND LOGO LISTED ON EVENT PAGE WEBSITE
STARTING IN		3. THIS IS FOR THOSE WHO CANNOT ATTEND THE SUMMER MEETING, BUT WANT TO
May 2019		SPONSOR THE EVENT AND STILL GET NOTICED
		3. UNLIMITED SPONSORSHIPS AVAILABLE

^{**} Application, payment and logo/ad must be received by June 28, 2019 to be included in onsite brochure and event website.

Eligibility for Exhibiting

Exhibits should be staffed during all exhibit hours by qualified persons who can explain or demonstrate the displayed items. Payment must be paid in full prior to the event date.

Assignment of Space

Exhibit space is allocated by MSTCVS staff. If there is specific competition you do not want to be next to, please email Cindy Wikstrom at admin@mstcvs.org or include this information on your application.

Booth Description

Each exhibit will include one six-foot, skirted table with two chairs and wastebasket.

Electrical Needs

BRING YOUR OWN EXTENTION CORDS AND SURGE PROTECTORS AND HELP YOURSELF TO AVAILABLE OUTLETS.

Liability/Insurance

Neither MSTCVS nor Grand Traverse Resort assume responsibility for any loss, injury or damage occurring to an exhibitor or any exhibitor's property. It is the exhibitor's responsibility to have their person/materials insured against theft, damage, loss or injury.

Exhibitor Registration

All exhibitors must register onsite at the MSTCVS registration desk before setting up exhibits.

Hotel Reservations

Overnight guestroom reservations must be made directly with the hotel of your choice.

Cancellations & Refunds

Cancellations will be accepted with written notice on or before June 28, 2019. After June 28, 2019, a 50% cancellation fee will be assessed.

Questions

Please contact Cindy Wikstrom, Executive Director, at 517-252-4324 or admin@mstcvs.org

Please Enclose Your Payment with the Exhibit Space Application and Contract to Confirm Your Booth Space NO LATER THAN June 28, 2019.

Mail completed form and payment to:

MSTCVS, PO Box 411, Williamston, MI 48895 Tax ID # 38-3071615 Or email to admin@mstcvs.org

If you have any questions, please contact Cindy Wikstrom, Executive Director, at admin@mstcvs.org
517-252-4324

2019 Exhibit Space Application and Contract Exhibitor Company Name: Product or Service to be Exhibited: List specific competition you do not want to be next to: Mailing Address: _____ City/State/Zip: _____ Email: _____ Contact Person: Office Phone: _____ Cell Phone: _____ **Exhibitor Fees (Choose one)** ☐ Gold \$5.000 ☐ Silver - \$3,000 ☐ Exhibitor - \$2,000 Sponsorship Options (Optional) □ PowerPoint Slide \$300 □ Welcome Reception \$2500 □ Breakfast \$4000 □ Lunch \$6000 □ Break \$1500 □ Representing \$1000 **Exhibit Representatives** Name: Cell Phone: Cell Phone: Cell Phone: _____ Cell Phone: ______ Name: ___ Email: All Sponsors are invited to the Friday evening banquet for dinner and entertainment at the Great Lakes Loons Stadium and will receive 2-4 complimentary tickets based on your level of sponsorship. Please indicate the number of Friday evening banquet tickets you will need: x \$35 = \$ Additional banquet tickets cost \$35 per ticket T-Shirt Sizes of those attending the Friday banquet (enter Qty.) ____S ___M ___L __XL XXL Other [] Check - payable to MSTCVS [] American Express [] Discover [] MasterCard [] Visa Amount to Charge: \$_________________________________ Card Holder Name: _____ Exp. Date: Sec Code: Card Number: Billing Address:

Card Holder Signature Date

City/State/Zip: