

## Sponsor Registration

8<sup>th</sup> Annual National CEU Roundtable  
The Olmsted  
3701 Frankfort Avenue  
Louisville, Kentucky 40206



Wednesday, October 8th, 2008  
7:30 am – 5:30 pm

*“The Delicate Balance Of Today’s Medical Profession”*

### **Sponsor Information - DEADLINE SEPTEMBER 10TH.**

Company \_\_\_\_\_ Contact \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

### **Confirmation sent via Email**

Email Address \_\_\_\_\_

Type of Sponsorship: (circle one)    \*Break    \*Bag    \*T-shirt    \*Printing

Representative #1 Name \_\_\_\_\_

Email Address \_\_\_\_\_ Phone \_\_\_\_\_

Representative #2 (additional \$75 if applicable to your Sponsorship) Name \_\_\_\_\_

Email Address \_\_\_\_\_ Phone \_\_\_\_\_

### **Exhibitor Booth Information (\$259)**

Skirted & draped 8’ table, & two folding chairs.

### **Electricity**

In need of electricity? Additional fee not required by The Olmsted; bring your own cords. All electrical cords laid by an outside vendor must be completely covered or taped by the user and said covering must meet the final approval of The Olmsted management on duty.

### **Door Prize**

For additional recognition during the conference, it is recommended that all exhibitors provide at least one door prize. Schedule for door prize give away will be provided at conference.

### **Best Decorated Booth for Conference Theme**

The best decorated booth for this year’s theme *“The Delicate Balance Of Today’s Medical Profession”* will receive a FREE booth (valued at \$259) for next year’s conference.

### **Hotel Accommodations**

The Hawthorn Suites has reserved a block of rooms listed under the PHIA Roundtable Conference. They are discounted to Single-Quad, \$132 per night, plus applicable taxes. Please call the hotel for reservations by September 15<sup>th</sup> (502-899-5959 or toll free 866-899-5959).

Make checks payable to **PHIA**, and mail them to: **4010 Dupont Circle, Suite 418, Louisville, KY 40207**

**Credit Card payments can be faxed to 502.473.8807 or emailed to [Sherrv@phia.com](mailto:Sherrv@phia.com) with application.**

Check #: \_\_\_\_\_ MC/VISA/Discover Card #: \_\_\_\_\_

(circle one)

Expiration Date: \_\_\_\_\_ 3 digit security code (on back of card): \_\_\_\_\_

Amount to be charged: \_\_\_\_\_

Name on Card: \_\_\_\_\_

Address for Card holder (if different from above) including zip \_\_\_\_\_

Authorized Signature \_\_\_\_\_