



San Francisco Neurological Society



**1630 S. Delaware Street
#25327
San Mateo, CA 94402**

**Tel: 650-288-5339
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www.sfneurological.org
apacia@sfneurological.org**

[501(c)6 Tax ID: 51-0478773]

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**Amanda Pacia
Executive Director**

February 18, 2012

Dear Supporters:

The San Francisco Neurological Society is pleased to announce its 64th Annual Meeting to be held in Sonoma, CA May 18-20, 2012.

The San Francisco Neurological Society is unique in the country because it brings together all the specialties in the neurosciences: neurology, neurosurgery, neuroradiology, pediatric neurology, neuropsychology, neuropathology, neuro-oncology and the basic neurosciences. Physicians and nurses can obtain CME credit by attending our educational programs.

Our organization has been advancing knowledge and improving practice in the neurosciences for over 60 years. The Society is committed to the professional development and continuing medical education of its members and has been since its inception.

We invite you to participate at our annual meeting in 2012. We have created special exhibit packages which include exhibit space in our exhibit hall and other opportunities. All exhibitors will be provided space for promotion of products or services in a room separate from our educational program.

The San Francisco Neurological Society is a medical society, but not a charitable organization, and is incorporated as a non-profit 501(c) 6. The Tax ID # is 51-0478773.

If you are interested in exhibiting, please complete the exhibitor application form and make checks payable to the "SF Neurological Society" (or indicate your credit card number on the form) and mail to the address listed.

We appreciate your support!

Sincerely,

Amanda Pacia
Executive Director
San Francisco Neurological Society



San Francisco Neurological Society



64th Annual Meeting Exhibit/Sponsorship Packages

Location: The Lodge, Sonoma, CA

Date: May 18 - 20, 2012

<u>2012 Annual Meeting Sponsor</u>	\$15,000
<ul style="list-style-type: none">• Exhibit space at the 2012 Annual Meeting Exhibit Hall - 3 days• Annual Meeting Attendance for TWO• Exhibit space at ALL CME activities (4-6) in 2012• Attendance for up to FOUR representatives at all 2012 CME activities• Signage with recognition of Annual Meeting Sponsor support	
<u>Platinum Exhibitor</u>	\$10,000
<ul style="list-style-type: none">• Exhibit space at the 2012 Annual Meeting Exhibit Hall - 3 days• Exhibit space at ALL CME programs (4-5) in 2011• Signage with recognition of Platinum Exhibitor support	
<u>Gold Exhibitor</u>	\$6,000
<ul style="list-style-type: none">• Exhibit space at the Annual Meeting Exhibit Hall - 3 days• Exhibit space at 4 CME programs in 2012• Signage with recognition of Gold Exhibitor support	
<u>Silver Exhibitor</u>	\$5,000
<ul style="list-style-type: none">• Exhibit space at the Annual Meeting Exhibit Hall - 3 days• Exhibit space at 3 CME programs in 2012• Signage with recognition of Silver Exhibitor support	
<u>Bronze Exhibitor</u>	\$4,000
<ul style="list-style-type: none">• Exhibit space at the Annual Meeting Exhibit Hall - 3 days• Exhibit space at 2 CME programs in 2012• Signage with recognition of Bronze Exhibitor support	
<u>Annual Meeting Daily Exhibitor</u>	\$1,000 per day
<ul style="list-style-type: none">• Exhibit space at the Annual Meeting Exhibit Hall	
<u>Non-profit/Medical Societies/Senior Communities Exhibitor</u>	\$600 per day
<ul style="list-style-type: none">• Exhibit space at the Annual Meeting Exhibit Hall	

Disclaimer: Please note that all commercial exhibits take place in a separate room from the CME activity. Commercial support representatives are invited to sit in and listen to the CME activity for educational purposes, but may not participate with Q&A or the CME evaluations. Commercial supporters may not bring any materials or advertising into the CME activity.



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64th Annual Meeting Exhibit/Sponsorship Packages

Location: The Lodge, Sonoma, CA

Date: May 18 - 20, 2012



Please Select:

- _____ 2012 Annual Meeting Sponsor (\$15,000)
- _____ Platinum Exhibitor (\$10,000)
- _____ Gold Exhibitor (\$6,000)
- _____ Silver Exhibitor (\$5,000)
- _____ Bronze Exhibitor (\$4,000)
- _____ Daily Exhibitor (\$1,000) _____ # of days
- _____ Non-Profit/Medical Society Exhibitor/Senior Communities (\$600) _____ # of days

Company Name: _____

Contact Person: _____

Address: _____

City, State, Zip: _____

Phone: _____ Fax: _____

Email: _____

Company Website: _____

Check Enclosed: \$ _____

Credit Card: Visa Mastercard American Express

Credit Card #: _____ Exp. Date: _____

Signature: _____

Return completed application with payment to:

San Francisco Neurological Society
 1630 S. Delaware Street, #25327
 San Mateo, CA 94402 - Please NOTE NEW ADDRESS as of 2/14/2012
Or FAX this form to (650) 347-4975

For more information, please call:
 Amanda Pacia, Executive Director
 (650) 288-5339 or email apacia@sfneurological.org



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Exhibitor Application for Program:

The SFNS is committed to the continuing medical education (CME) of its members, designed to improve and enhance critical thinking and analysis of the latest neuroscientific information, to help promote innovation in the basic sciences, and to increase competence and improve practice performance and thereby patient care in the clinical sciences. This is accomplished by providing diverse, advanced, relevant, judicious, challenging and sometimes controversial information in the neurosciences, provided through didactic programs and scholarly debate. Our CME activities are independent of the control of commercial interests.

As part of this commitment, the SFNS has outlined in this written agreement the terms, conditions, and purposes of commercial support for its CME activities. Commercial Support is defined as financial, or in-kind, contributions given by a commercial interest in which is used to pay all or part of the costs of a CME activity.

Date of Activity:	Name of Commercial Interest:
Location:	Amount of Education Gift (direct or in-kind): \$
Title of CME Activity:	Gift will be used for: meeting expenses

_____ A check in the amount of \$ _____ will be sent in the mail.

_____ Below is my credit card number. Please charge my card \$ _____.

Representative #1 attending: _____

Representative #2 attending: _____

Credit Card: Visa Mastercard American Express

Credit Card #: _____ Exp. Date: _____

Terms, Conditions, and Purposes

Independence

1. This activity is for scientific and educational purposes only and will not promote any specific proprietary business interest of the Commercial Interest.
2. The Accredited Provider is responsible for all decisions regarding the identification of educational needs, determination of educational objectives, selection and presentation of content, selection of all persons and organizations that will be in a position to control the content of the CME, selection of education methods, and the evaluation of the activity.

Appropriate Use of Commercial Support

3. The Accredited Provider will make all decisions regarding the disposition and disbursement of the funds from the Commercial Interest.
4. The Commercial Interest will not require the Accredited Provider to accept advice or services concerning teachers, authors, or participants or other education matters, including content, as conditions of receiving this gift.
5. All commercial support associated with this activity will be given with the full knowledge and approval of the Accredited Provider. No other payments shall be given to the director of the activity, planning committee members, teachers or authors, joint sponsor, or any others involved with the supported activity.
6. The Accredited Provider will upon request, furnish the Commercial Interest documentation detailing the receipt and expenditure of the commercial support.

Commercial Promotion

7. Product-promotion material or product-specific advertisement of any type is prohibited in or during the CME activity. The juxtaposition of editorial and advertising material on the same products or subjects is not allowed. Live or enduring promotional activities must be kept separate from the CME activity. Promotional materials cannot be displayed or distributed in the education space



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immediately before, during or after a CME activity. Commercial Interests may not engage in sales or promotional activities while in the space or place of the CME activity.

8. The Commercial Interest may not be the agent providing the CME activity to the learners.

Disclosure

9. The Accredited Provider will ensure that the source of support from the Commercial Interest, either direct or “inkind,” is disclosed to the participants, in program brochures, syllabi, and other program materials, and at the time of the activity. This disclosure will not include the use of a trade name or a product-group message. The acknowledgment of commercial support may state the name, mission, and clinical involvement of the company or institution and may include corporate logos and slogans, if they are not product promotional in nature.

The Commercial Supporter and the SFNS agree to abide by all requirements of the **ACCME Standards for Commercial SupportSM**.

Name of Accredited Provider: San Francisco Neurological Society

Tax ID Number: 51-0478773

Contact Person: Amanda Pacia, Executive Director

Email Address: apacia@sfneurological.org

Phone Number: (650) 288-5339

Fax Number: (650) 347-4975

Name of Commercial Interest: _____

Address: _____

City, State, Zip: _____

Contact Person: _____

Email Address: _____


Phone Number: _____ Fax Number: _____

Agreed by Authorized Representatives

Commercial Interest

Accredited Provider

Signature and Date


Signature and Date

Print Name

Amanda Pacia
Print Name

Title

Executive Director
Title

Return completed application with payment to: San Francisco Neurological Society
1630 S. Delaware Street, #25327, San Mateo, CA 94402 - Please NOTE NEW ADDRESS as of 2/14/2012
For credit card payments, you may fax this form to (650) 347-4975.

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