

**The 41st Annual PA/Medical Practitioner
Refresher/Recertification Course**
Sponsored by **The Society of Army Physician Assistants**
April 20th thru April 24th 2020, Holiday Inn, I-95 Fayetteville North Carolina
EXHIBITOR (GOLD) SPACE REQUEST

EXHIBITOR FEES: \$2500 includes two or three 6' foot table for a tabletop display, draped and skirted, one wastebasket, a listing of your firm in meeting materials, continental breakfasts, and exhibitor lunch, all refreshment breaks and tickets to social functions for one member of your party. Additional tickets may be purchased if desired. By agreeing to exhibit, the exhibitor also agrees to comply with all Americans With Disabilities Act regulations in the design and set up of the exhibit. Exhibitor further agrees to abide by rules and regulations and restrictions outlined herein. Exhibitor agrees to accept a relocation should it be necessary for reasons beyond the control of SAPA

Name of Company as it should appear on Printed Materials

Mailing Address

City, State, Zip Code

Company Telephone Number

E-Mail Address

Company Fax Number

Name, Address and Phone Number of Primary Contact

Special needs and requests: (Please Specify) We will make every effort to accommodate your firm: _____

Full payment of the \$2500 Gold exhibitor fee is requested at least 10 days prior to the start of the conference (April 3rd 2020). Please made check payable to SAPA P.O. Box 623, Monmouth, IL. 61462. Additional tickets to social functions will be available In order to ensure that name tags/badges and meeting materials are prepared for each of your representatives, please list here all the representatives who will be attending from your firm. Please list everyone. Use an additional sheet if necessary:

1. Name of Primary Representative for this meeting: _____

Address: _____

City/State/Zip: _____

Phone: _____

2. Additional Representative: _____

3. Additional Representative: _____

4. Additional Representative: _____

5. Additional Representative: _____

6. Additional Representative: _____

EXHIBIT ONLY:

Our firm would like to exhibit only for a fee of \$2500 (Gold).

Our check for \$2500 is enclosed. (Includes Attendance list)

Other arrangements (please describe): _____

OTHER SUPPORT REQUESTS:

Our firm would be interested in providing support for the following projects (please contact the Conference Coordinator or Registrar for details). Your firm will be given full credit for the sponsorship and appropriately recognized.

- Door prizes for general membership meeting
- Plaques and special awards to be presented at the banquet
- Printing of conference brochures and advertising (for those firms that have in house printing capabilities, SAPA would be willing to make long term arrangements)
- Sponsorship or advertising in the SAPA Journal (available are small advertisements, full page, full issue, yearly or permanent)

Total Enclosed: _____ ***Payment Must Be Received In Full Prior to Being Officially Registered!***
Method of Payment: Cash Check Credit Card (SAPA is now able to accept American Express, Mastercard and Visa)
Credit Card (Circle) Mastercard Visa Amen EX Credit Card Number : _____
Expiration Date: _____ **I authorize SAPA to Charge My Credit Card the above Conference Registration Fees. SAPA reserves the right to charge the correct amount if different from the total payment listed above.**

Signature Required for Credit Card Use: _____

CONTACT:

ORIE ROBERT (BOB) POTTER, PA-C
 Conference Coordinator
 P. O. Box 623
 Monmouth, Illinois 61462
 Tel: 309-734-5446
 FAX: 309-734-4489
 E-mail orpotter@aol.com

THANK YOU FOR ALL YOUR SUPPORT, PAST, PRESENT, AND FUTURE

Hotel Accommodations Available:

- | | |
|-------------------------------|----------------|
| (Conference Hotel) | |
| Holiday Inn I-95 Fayetteville | Red Roof Inn |
| 1944 Cedar Creek Road | At Exit 49 |
| Fayetteville, NC | (910) 438-0748 |
| At Exit 49 | |
| (910) 323-1600 | Fairfield Inn |
| | At Exit 49 |
| Comfort Inn - I-95 | (910) 433-2666 |
| At Exit 49 | |
| (910) 323-8333 | DoubleTree |
| | At Exit 49 |
| Roadway Inn I-95 | (910) 323-8282 |
| At Exit 49 | |
| (910) 323-8333 | Sleep Inn |
| | At Exit 49 |
| Econo-Lodge (Cedar Creek) | (910)433-909 |
| (910)-433-2100 | |
| Hampton Innr | |
| At Exit 49 | |
| (910) 323-0011 | |
| Super 8 | |
| At Exit 49 | |
| (910) 323-3826 | |

