

THE PODIATRY INSTITUTE

"Insights and Controversies in Foot and Ankle Surgery"

Exhibit Space Application

February 5-7, 2009

Park City Marriott

Complete this exhibit space application promptly and fax it to 404-508-8539 with a charge card number, or mail it with your check to insure your space reservation. You are not considered registered until payment is received.

Exhibitor Fee (Table Top) = \$1250 Full payment must accompany this completed form.

Payment Method

My Check in the amount of \$_____ Payment enclosed

Please make checks payable to: The Podiatry Institute ♦ Federal Tax ID #58-1906272

Charge Visa Master Card American Express Discover

Credit Card Number _____ Exp. Date ____ / ____ / _____

Cardholder Name _____ Signature _____

Mail Checks, Application & Registration Form to: The Podiatry Institute
2675 North Decatur Rd. ♦ Suite 309 ♦ Decatur, GA 30033

Company Info (As you want it to appear in the program)

(Name) _____

(Street Address) _____

(City) _____ (State) _____ (Zip) _____

(Office Phone) _____ - _____ - _____ (Website) _____

Fax _____ - _____ - _____

Representative(s) at Conference _____

Company Contact _____

Title _____

Email _____

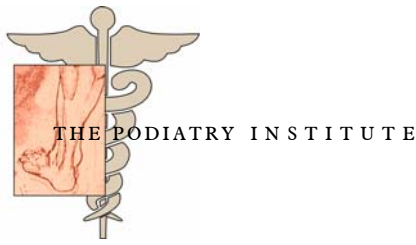
Product or Service to be Displayed _____

Companies You Prefer Not To Exhibit Next To: _____

Electricity Required? Yes No

For more information contact: Dan Vickers, CAE ♦ Executive Director ♦ 770-939-0393
The Podiatry Institute ♦ 2675 North Decatur Rd. ♦ Suite 309 ♦ Decatur, GA 30033

Travel Contact Trish Graves with Peachtree Travel ♦ 678-689-0176 ♦ tgraves.ptravel@wspan.com



"Insights and Controversies in Foot and Ankle Surgery"

Exhibitor Prospectus

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- ◆ Exhibitors will have **20+ hours** of exhibit time and direct participant exposure during the three-day conference.
- ◆ Continental breakfasts, dinners, and breaks will be held in the exhibit hall to maximize your contact with attendees.
- ◆ There are a number of opportunities available to sponsor conference events & speakers. Call Dan Vickers at 770-939-0393 for more information.
- ◆ **CANCELLATION POLICY:** Cancellation requests must be made in writing, via fax, mail or e-mail and postmarked no later than 2 weeks before the start date of the conference. All refund requests will be assessed a \$250 cancellation fee per booth. In lieu of a refund you may transfer the full amount to an alternate Podiatry Institute meeting within one year of cancellation. If canceling less than two weeks prior to the conference **NO** refund will be due to the exhibitor. Instead you may transfer \$750 of the booth fee to an alternate meeting. All transferred funds must be used within one year of the original date of cancellation.

Exhibit Table Top Fee = \$1250

Exhibit Registration Full payment for your exhibit must accompany space confirmation agreement. Applications will be accepted until space is sold out.

Move-in and Set-up Thursday, February 5 – 1:00 PM - 3:00 PM

Exhibit Hours	Thursday, February 5	Friday, February 6	Saturday, February 7
	3:30 – 9:30 PM	7:00 – 9:30 AM	7:00 – 9:30 AM
		3:30 – 9:30 PM	3:30 – 7:30 PM

Exhibitor Move-out Saturday, February 7 – 7:30 PM - 9:30 PM

Conference Hotel Park City Marriott
1895 Sidewinder Drive
Park City, UT 84060
800-234-9003
Podiatry Institute Rate: \$219 Single/Double
Please make your reservation NOW! Hotel fills up quickly!
Cut-off date: until it is full or January 5, 2009, whichever comes first.

Travel Call Trish Graves with Peachtree Travel ♦ 678-689-0176

Shipping Information

Forward Materials to:
Attn: Dan Vickers
Park City Marriott
1895 Sidewinder Drive
Park City, UT 84060
435-649-2900

For Further Information

Dan Vickers, CAE
Executive Director
The Podiatry Institute
2675 North Decatur Road, Suite 309
Decatur, GA 30033
770-939-0393