



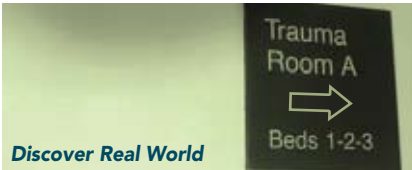
11<sup>th</sup> ANNUAL

# ED Benchmarks<sup>2008</sup>

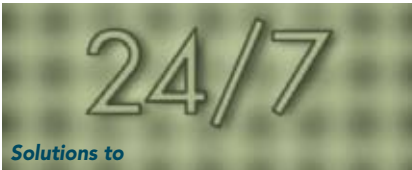
presents

Discover Real World Solutions to Common ED Problems

## EXHIBITOR & SPONSOR PROSPECTUS



Discover Real World



Solutions to



Common ED Problems...

## Conference Location

The Rosen Shingle Creek · 9939 Universal Boulevard  
Orlando, FL 32819 · Reservations (866) 996-6338

## Conference Overview

*ED Benchmarks 2008* will emphasize real world solutions to common ED problems. The very popular Town Hall Forum will be returning to provide an opportunity to have individual ED challenges addressed by an expert panel. After this conference, attendees will be able to implement concrete plans and strategies to the problems they face.

## Audience

Emergency Physicians, Nurse Administrators, Hospital Administrators, Quality Assurance Administrators, ED Group Administrators, Physicians in Training and other healthcare professionals interested in expanding their knowledge of ED performance measures.

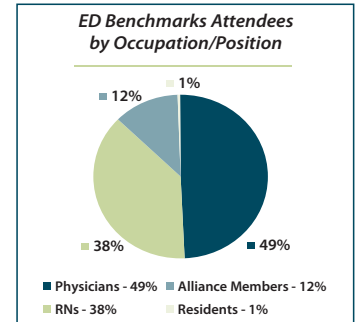
## More Information

Browse to [www.emlrc.org](http://www.emlrc.org) or call (800) 766-6335.

## Presented by

Emergency Medicine Learning & Resource Center . [www.emlrc.org](http://www.emlrc.org)

March 28-30, 2008



11<sup>th</sup> ANNUAL

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> **Emergency Medicine Learning & Resource Center**  
3717 South Conway Road, Orlando, FL 32812  
800.766.6335 | Fax 407.281.4407 | [www.emlrc.org](http://www.emlrc.org)

NONPROFIT ORGANIZATION  
US POSTAGE PAID  
PERMIT NO. 2361  
ORLANDO, FL

## Conference Location



**The Rosen Shingle Creek Resort** · 9939 Universal Boulevard  
Orlando, FL 32819 . Reservations (866) 996-6338  
Room Rate: \$185.00 S/D · Mention *EMLRC's ED Benchmarks 2008*  
Cut-off date for special room rate: Wednesday, February 27, 2008

## Exhibit Hall Dates & Hours

### Set-up

Thursday, March 27<sup>th</sup> 4:00pm - 6:00pm  
Friday, March 28<sup>th</sup> 6:30am - 7:00am

### Exhibits Open

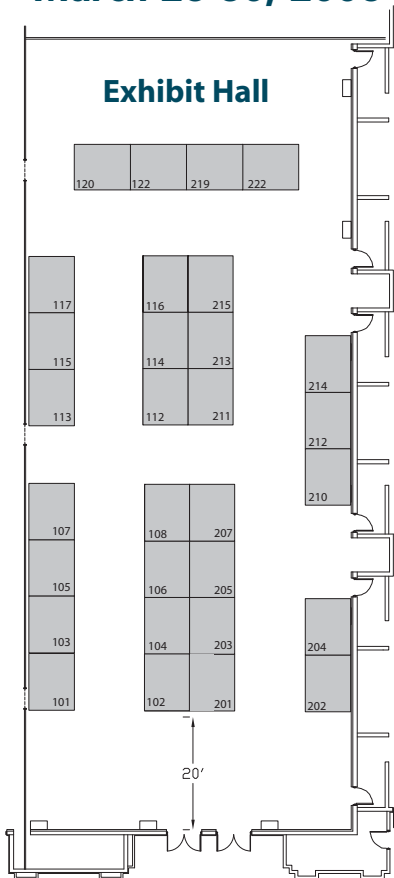
Friday, March 28<sup>th</sup> 7:00am - 2:45pm  
Saturday, March 29<sup>th</sup> 7:00am - 10:00am

### Dismantle

Saturday, March 29<sup>th</sup> 10:00am - 12:00pm

presents

## March 28-30, 2008



### Assignment of Space

Exhibit space will be assigned upon receipt of completed registration form and registration fee. Application and payment must be received at the EMLRC office by February 27, 2008 to reserve space and to be included in the attendee conference materials. For cancellations an administrative fee of \$75.00 will be retained. Cancellations and refunds will be made if requested in writing to the 11<sup>th</sup> Annual ED Benchmarks Conference Registrar.

### Exhibitor Kit

The 11<sup>th</sup> Annual ED Benchmarks Conference Exhibitor Kit is available at [www.emlrc.org/edbenchmarks2008.htm](http://www.emlrc.org/edbenchmarks2008.htm). Contact Jerry Cutchens at [jcutchens@emlrc.org](mailto:jcutchens@emlrc.org) or 407-281-7396 x15 for additional information.

### Exhibitor Liability

Exhibiting organizations assume full responsibility for their professional/personal property and obtaining insurance to protect against lost or stolen items.

### ACCME Agreement

I/We agree to abide by all Rules and Regulations listed and which are part of the agreement between my/our company and the Emergency Medicine Learning & Resource Center. I/We also agree to comply with ACCME Standards for Commercial Support. I/We also agree to have no involvement or influence with the content of the CME portion of the conference. You are hereby authorized to reserve space for my/our company for the 11<sup>th</sup> Annual ED Benchmarks Conference.

### Agreed and Signed by:

## Exhibit and Sponsorship Opportunities

- Exhibit Booth \$900 Includes: 8'x10' carpeted booth with draped back and side walls, 6' table, 2 chairs, wastebasket, 2 exhibitor badges and a booth identification sign.
- ★ Silver Sponsorship \$1750 Includes: Sponsorship recognition (text): conference signage, materials, website, slideshow and badges; Attendee digital mailing list; (4) Representative registrations. *Ask about the Exhibit Booth Special.*
- ★ Gold Sponsorship \$2500 Includes: Sponsorship recognition (logo): conference signage, materials, website, slideshow and badges; Attendee digital mailing list; (6) Representative registrations; and Marketing Resource opportunity. *Ask about the Exhibit Booth Special.*
- ★ Platinum Sponsorship \$4000 Includes: Sponsorship recognition (logo): conference signage, materials, website, slideshow and badges; Attendee digital mailing list; (8) Representative registrations; and Marketing Resource opportunity. *Ask about the (2) Exhibit Booths Special.*
- Marketing Resource \$500 Includes: Opportunity to provide your Marketing Materials to the conference attendees at the Resource Table. *Absentee booth option.*
- Name Badges \$1500 Includes: Corporate logo displayed on all attendee name badges.
- Breaks \$1000 Includes: Signage at all (4) of the food & beverage breaks held in the exhibit hall recognizing sponsorship.
- Lunch \$5000 Includes: Recognition of sponsorship on signage and from podium; and Silver Sponsorship. *Lunch - Friday, March 28<sup>th</sup>*

## Exhibit and Sponsorship Registration Form

Organization Name - As to appear on your identification sign

Exhibitor Name(s) - As to appear on your name badge(s)

Address

City,

State

Zip

Phone

Fax

Email

Preferred Booth Space - 1st Choice \_\_\_\_\_ 2nd Choice \_\_\_\_\_ 3rd Choice \_\_\_\_\_

\_\_\_\_\_ Yes! We want to Sponsor the Conference! Our sponsorship(s) checked.

- \_\_\_\_\_ ★ Platinum - \$4000; ★ Gold - \$2500; ★ Silver - \$1750;  Marketing Resource - \$500;
- \_\_\_\_\_  Name Badges - \$1500;  Breaks - \$1000;  Lunch - \$5000
- \_\_\_\_\_ \$ 900.00  Exhibit Booth
- \_\_\_\_\_ \$ 30.00 Additional Representative(s) (2 included with each booth)
- \_\_\_\_\_ \$ 50.00 Late Fee after February 27, 2008
- \_\_\_\_\_ \$ Total Fees Enclosed

Fees payable by Visa, Mastercard or Check. Checks payable to EMLRC and mail to 3717 S. Conway Rd. Orlando, FL 32812. Phone: (800) 766-6335 Fax: (407) 281-4407 Federal Tax ID #59-3001777

Credit Card Number: \_\_\_\_\_

Credit Card Type: [ ] Visa [ ] Mastercard

Expiration Date: \_\_\_\_\_ Cardholder Name: \_\_\_\_\_

Cardholder Signature: \_\_\_\_\_