

MICHIGAN PODIATRIC MEDICAL ASSOCIATION  
**GREAT LAKES  
CONFERENCE**  
FEBRUARY 20-24, 2019  
THE HENRY | DEARBORN, MICHIGAN



**EXHIBITOR  
INFORMATION**

Don't miss this ideal opportunity to reach Podiatrists and office staff from across the State of Michigan. Convention attendees attend the Great Lakes Conference to learn how to improve the care and services to their patients, while making their practices more profitable and efficient. Reserve your booth location today!

## EXHIBIT AND SPONSORSHIP OPPORTUNITIES

**6' x 8' Exhibit Booth ..... \$1,000**

Registration for two representatives (each additional representative is \$75), continental breakfast in exhibit area each morning, lunch each day, company listing in the conference booklet and mailing list of conference attendees.

DEADLINE: February 6, 2019 for entry into conference booklet.

**Company Handout ..... \$200**

Paper handout from your company, supplied by vendor, distributed to all attendees at registration. You must be an exhibitor at the 2019 MPMA Conference to register for this opportunity. DEADLINE: February 6, 2019

**Conference Booklet Advertisement**

*(Advertisements are full color)*

Half page Vertical (10"h x 4"w)..... \$300

Half page Horizontal (5"h x 8"w)..... \$300

Full Page (10"h x 8"w) ..... \$500

DEADLINE: January 28, 2019

**Break Sponsor..... \$1,000**

Select the day you would like to sponsor from available opportunities. A representative from MPMA will contact you to make selection. Company name is displayed at each break table throughout the day. DEADLINE: February 6, 2019

**Continental Breakfast Sponsor ..... \$1,500**

Select the day you would like to sponsor from available opportunities. A representative from MPMA will contact you to make selection. Company name is displayed at the breakfast. DEADLINE: February 6, 2019

**Lunch Sponsor ..... \$2,500**

Select the day you would like to sponsor from available opportunities. A representative from MPMA will contact you to make selection. Company name is displayed at the lunch. DEADLINE: February 6, 2019

**Registration Bags ..... \$1,500 (or provide in-kind)**

Your company name and logo along with MPMA logo imprinted on the bags, selected and ordered by MPMA. Other company inserts will be placed into the registration bag. DEADLINE: January 28, 2019



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**Lanyards .....\$750 (or provide in-kind)**

Your company name or logo imprinted on the lanyard, selected and ordered by MPMA. DEADLINE: January 28, 2019

**Notepads .....\$750 (or provide in-kind)**

Your company name and logo along with MPMA logo imprinted on the notepad (8.5”w x 11” h), ordered by MPMA.  
DEADLINE: January 28, 2019

**Pens.....\$500 (or provide in-kind)**

Your company name or logo imprinted on the pen, selected and ordered by MPMA. DEADLINE: January 28, 2019

**Design Your Own Sponsorship**

MPMA will consider all in-kind donations and sponsorships that provide benefit to MPMA members and convention attendees. If you have an item or sponsorship that you would like to provide, please contact Geri Root at [geri@kdafirm.com](mailto:geri@kdafirm.com) or 800-968-6762.

## EXHIBIT INFORMATION

### EXHIBIT SET-UP

Wednesday, February 20..... 3:00 p.m. – 8:00 p.m.  
Thursday, February 21..... 7:00 a.m. – 8:00 a.m.

### EXHIBIT HOURS

Thursday, February 21..... 7:00 a.m. – 4:30 p.m.  
Friday, February 22..... 7:00 a.m. – 4:00 p.m.  
Saturday, February 23..... 7:00 a.m. – 12:00 p.m.

### EXHIBIT TEAR DOWN

Saturday, February 23..... 12:00 p.m. – 2:00 p.m.

### EXHIBIT SHIPPING

The Henry | 300 Town Center Drive  
Fairlane Plaza | Dearborn, MI 48126  
Date of Event: February 20-24, 2019

### MPMA EXHIBIT RULES AND REGULATIONS

A complete list of exhibit rules and regulations can be found at [mpma.org](http://mpma.org).

### BOOTH SPACE

Vendors may select their booth location online at [www.mpma.org](http://www.mpma.org). Booth assignments will be updated on the MPMA website as registrations are received. The MPMA will honor booth requests based on a first come, first serve basis upon receipt of exhibitor contract and full payment. Booth spaces are 6’ x 8’ areas, with one (1) skirted table, two (2) chairs, and one (1) wastebasket. Electricity is available upon request. An additional \$35 fee will apply. The booths are piped and draped.

### HOTEL INFORMATION

**The Henry**  
**300 Town Center Drive | Fairlane Plaza**  
**Dearborn, MI 48126 | Phone: 888.709.8081**

Overnight rooms are available starting at \$139 per night (plus tax). Please contact the The Henry directly for reservations. Be sure to mention the MPMA 2019 Conference to receive this low rate. This rate expires February 6, 2019.

# EXHIBITOR SCHEDULE

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## WEDNESDAY, FEBRUARY 20

3:00 p.m. – 8:00 p.m.

**Exhibit Set-Up**

## THURSDAY, FEBRUARY 21

6:00 a.m. – 7:00 a.m.

**Exhibit Set-Up**

7:00 a.m.

**Exhibit Hall Opens with Continental Breakfast**

10:00 a.m. – 10:30 a.m.

**Break in Exhibit Hall**

12:00 p.m. – 1:15 p.m.

**Conference Lunch in Exhibit Hall**

*Doctors will join you in the Exhibit Hall for a strolling lunch.*

4:15 p.m. – 4:30 p.m.

**Break in Exhibit Hall**

4:30 p.m.

**Exhibit Hall Closes**

## FRIDAY, FEBRUARY 22

7:00 a.m.

**Exhibit Hall Opens with Continental Breakfast**

9:00 a.m. – 9:30 a.m.

**Break in Exhibit Hall**

11:45 a.m. – 1:15 p.m.

**Randy K. Kaplan, DPM Legislative Luncheon**

*Exhibitors are invited to attend. Pre-registration for lunch is necessary.*

3:30 p.m. – 3:45 p.m.

**Break in Exhibit Hall**

4:00 p.m.

**Exhibit Hall Closes**

## SATURDAY, FEBRUARY 23

7:00 a.m.

**Exhibit Hall Opens with Continental Breakfast**

8:45 a.m. – 9:00 a.m.

**Break in Exhibit Hall**

10:15 a.m. – 10:30 a.m.

**Break in Exhibit Hall**

12:00 p.m.

**Exhibit Hall Closes**

12:00 p.m. – 2:00 p.m.

**Exhibit Tear-Down**

# EXHIBITOR REGISTRATION

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## COMPANY INFORMATION

PLEASE PRINT *(Information provided below will be used for conference booklet.)*

Company Name

Contact Name

Phone

Address

City

State

Zip

Website

Email

Please describe up to two categories that best describe your products and/or services:

Ambulatory Devices

Electronic Medical Records

Medical Supplies

Anesthesia

Equipment - Diagnostic

Office Supplies

Billing: Software or Services

Implants and Surgical Devices

Orthotics and Corrective Devices

Chairs and Other Podiatric Equipment

Instruments

Shoes

Computer Software

Laboratory and Diagnostic Services

Other \_\_\_\_\_

List any company you prefer not to be placed next to. Requests honored if possible. You can select your booth location online at [www.mpma.org](http://www.mpma.org).

## ATTENDEE INFORMATION

Each exhibit booth includes registration for 2 representatives. Each additional representative is \$75.

1. Badge to Read

Lunches:  Thursday  Friday  Saturday

Email

2. Badge to Read

Lunches:  Thursday  Friday  Saturday

Email

3. Badge to Read

Lunches:  Thursday  Friday  Saturday

Email

4. Badge to Read

Lunches:  Thursday  Friday  Saturday

Email

REGISTRATION CONTINUED ON REVERSE >>



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**EXHIBIT AND SPONSORSHIP FEES**

**SUBTOTAL**

<input type="checkbox"/> Exhibit Booth .....	\$1,000	_____
<input type="checkbox"/> Electricity.....	\$35	_____
<input type="checkbox"/> Additional Representatives (registration for two representatives is included) _____ X \$75 each =		_____
Booth Preference 1 _____		
Booth Preference 2 _____		
Booth Preference 3 _____		
<input type="checkbox"/> Lanyards .....	<input type="checkbox"/> In-Kind ..... \$750	_____
<input type="checkbox"/> Notepads .....	<input type="checkbox"/> In-Kind ..... \$750	_____
<input type="checkbox"/> Pens .....	<input type="checkbox"/> In-Kind ..... \$500	_____
<input type="checkbox"/> Break Sponsor.....	\$1,000	_____
<input type="checkbox"/> Company Handout (must be registered as an exhibitor for this conference).....	\$200	_____
<input type="checkbox"/> Registration Bags .....	<input type="checkbox"/> In-Kind ..... \$600	_____
<input type="checkbox"/> Convention Program Advertisement		
<input type="checkbox"/> Half-page, vertical.....	\$300	_____
<input type="checkbox"/> Half-page, horizontal.....	\$300	_____
<input type="checkbox"/> Full Page .....	\$500	_____
<input type="checkbox"/> Continental Breakfast Sponsor .....	\$1,500	_____
<input type="checkbox"/> Lunch Sponsor.....	\$2,500	_____
	<b>TOTAL</b>	_____

**PAYMENT METHOD**

Check # \_\_\_\_\_  Visa  MasterCard  AMEX

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

\_\_\_\_\_  
Exp. Date CVV

\_\_\_\_\_  
Cardholder Name Billing Zip Code

\_\_\_\_\_  
Signature of Cardholder

**CANCELLATION POLICY** Requests for refunds must be made in writing to MPMA. Cancellations prior to January 28, 2019, will be refunded minus a processing fee of \$100. No refunds will be made if cancellation notice is received on or after January 28, 2019, regardless of registration date.

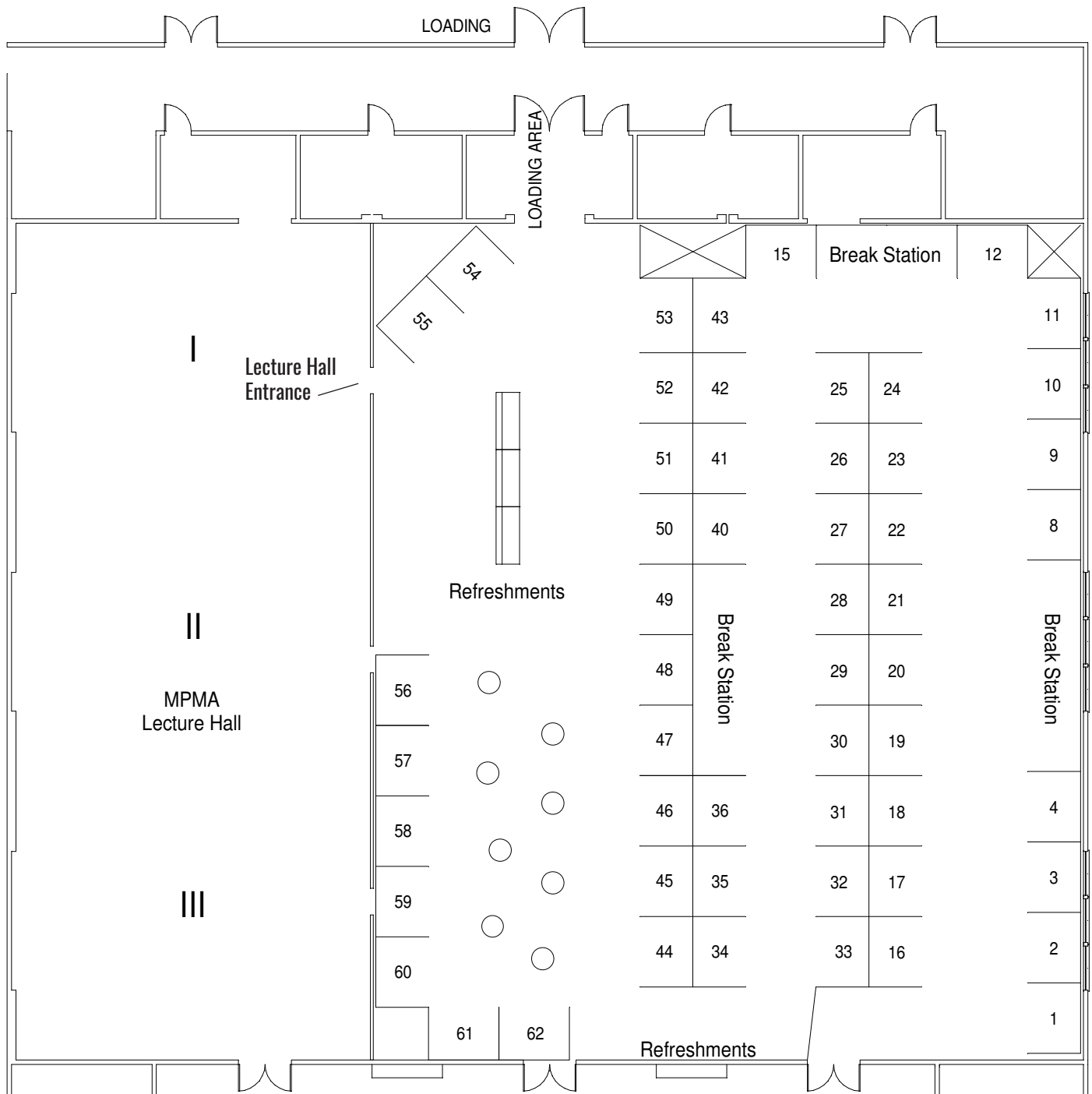
Please make checks payable to MPMA. Send completed registration form and payment to MPMA  
629 West Hillsdale Street | Lansing, MI 48933 or fax with credit card information to (517) 485-9408



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# EXHIBIT HALL DIAGRAM

ONLINE BOOTH SELECTION AVAILABLE AT [MPMA.ORG](http://MPMA.ORG)







Michigan Podiatric Medical Association  
629 West Hillsdale Street  
Lansing, MI 48933  
[www.mpma.org](http://www.mpma.org)



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