The MOA Autumn Convention attracts more than 350 osteopathic physicians, students, interns, residents and health care professionals, including practice managers, who are engaged in an educational and hands-on learning forum. Visit with physicians during scheduled breaks throughout the day.

**EXHIBIT DATE & HOURS**

Saturday, November 17, 2018
6:30 am - 4 pm
*Mandatory booth hours 7 am - 3:30 pm*

**Set up:**
Friday 12 - 6 pm
Saturday 6 - 7 am

**Tear down:**
Saturday 3:30 - 5 pm

**CONTACT**

Janna Ruedisale
E jruedisale@domoa.org
P (800) 657-1556 ext. 108
F 517-347-1566
The Michigan Osteopathic Association (MOA) is the statewide organization representing osteopathic medicine.

Osteopathic physicians (or DOs) are fully licensed physicians who take a whole-person approach to care. In addition to being trained in their specialty area, from family practice to sub-speciality, they are also trained to perform osteopathic manipulative medicine (OMM), a hands-on technique DOs use to diagnose and treat patients, not just symptoms.

The MOA Annual Autumn Scientific Convention has grown consistently each year, expecting to host over 300 physicians in 2018. Attendees represent a range of specialties from all over the state and country.

Contract and payment due by October 20, 2018.

No refunds will be issued after October 20, 2018. Any cancellations before that date will be assessed a $50 administration fee.

Disclaimer of liability: This agreement between MOA and the exhibitor is a license to use exhibition space at the event. No bailment is intended or created. MOA shall not be responsible or liable for any lost, stolen or damaged property of exhibitor or for personal injuries to exhibitor or exhibitor’s representatives. Exhibitor expressly releases MOA from any liability for any such loss, damage or injuries.

Self Parking $10 per day. Valet Parking for overnight guests $19 per day (unlimited in/out privileges) *parking rates subject to change without prior notification.

Up to two (2) badges per table display if no company badge. The two exhibitor badges may be pre-ordered through October 20, 2018. After that time, badges may be picked up at the event.

Exhibitors must wear an MOA badge or their company badge. Badges may only be worn by individuals working in an exhibit.

Before shipping any materials being used in connection with your event please contact the Convention Service Manager at (616) 776-6400. Shipments of material, literature, product, as well as cartons and envelopes should be addressed as follows:

Recipient's Name (person who will be picking up items)
c/o Amway Grand Plaza Hotel
187 Monroe Ave NW
Grand Rapids, MI 49503

If assistance is needed from our bellman to deliver your materials to any meeting room there will be a $10 per cart or $25 per pallet delivery fee.

Contact the Amway Grand Plaza, Curio Collection by Hilton at 616-774-2000. Rooms are $136 per night and must be booked by October 3, 2018 to be eligible for the group rate.
SPONSORSHIP OPPORTUNITIES

Platinum Sponsor - $8,000
- Premium table display location.
- One full page advertisement in the TRIAD.
- One full page advertisement in program.
- Advertisement on Convention mobile site.
- Homepage slide during the month of October on DOMOA.org
- Banner advertisement in MOA Pulse during the month of October, sent to all members.
- Logo recognition on convention webpage.

Gold Sponsor - $6,000
- Premium table display location.
- One half page advertisement in program.
- One half page advertisement in the TRIAD.
- Web banner advertisement for the month of October on MOA homepage.
- Banner advertisement in MOA Pulse during the month of October, sent to all members.
- Logo recognition on convention webpage.

Silver Sponsor - $4,500
- Table display.
- One quarter page advertisement in program.
- Web banner advertisement for a week in October on MOA homepage.
- Logo recognition in convention communications to attendees.
- Logo recognition on convention web page.

Bronze Sponsor - $2,500
- Table display.
- One quarter page advertisement in program.
- Logo recognition in convention communications to attendees.
- Logo recognition on convention web page.

Display Table Sponsor
- $900 — One table
- $450 — Non profit rate (verification required), one table.

Autumn Scientific Research Competition Sponsorship Levels:
- Platinum Sponsor - $1,000
- Gold Sponsor - $750
- Silver Sponsor - $500
- Bronze Sponsor - $250
- Patron Sponsor - $100
EXHIBITOR CONTRACT

ORGANIZATION NAME: _____________________________________________________________

CONTACT NAME & TITLE: ____________________________________________________________

EMAIL ADDRESS: ________________________________________________________________

ADDRESS: _______________________________________________________________________

PHONE NUMBER: ________________________ FAX NUMBER: _____________________________

Names of all reps on site (for name badges): __________________________________________

__________________________________________________________________________________

List of products or services you represent: _____________________________________________

__________________________________________________________________________________

List any companies or products you do not wish to have in close proximity: ________________

__________________________________________________________________________________

☐ I would like to purchase a boxed lunch - $20 ____# MUST PREORDER!

Electrical? ☐ Yes ☐ No (charges may apply) All packages include one draped & skirted display table, two
chairs, signage & name recognition in onsite collateral.

SPONSORSHIP OPTIONS

☐ Display Table - $900
☐ Non-profit rate for display table - $450
☐ Breakfast Sponsor - $1,000
☐ Break Sponsor - $500
☐ Platinum - $8,000
☐ Gold - $6,000
☐ Silver - $4,500
☐ Bronze - $2,500

TABLE $________ + SPONSORSHIP $________ + BOXED LUNCH $________ = TOTAL $________

Payment due Oct. 20, 2018

☐ Check enclosed ☐ Check will be mailed to: Michigan Osteopathic Association | Attn: Janna Ruedisale
2445 Woodlake Circle | Okemos, MI 48864
(Please make checks payable to Michigan Osteopathic Association)

Credit card: ☐ MasterCard ☐ Visa ☐ Discover

Cardholder name: ___________________________________________________________________

Billing address: ____________________________________________________________________ City________________________ State_____ Zip________

Card number ____________________________ Exp. date ______ CVV (3 digits) ________

Accept Participation: By completion of this form I am authorized and agree to participate in the indicated activity of the Michigan Osteopathic Association. I commit my company to the above financial obligation. Payment due: October 20, 2018.