

Dear Representative,

The **42nd Annual Carrell Krusen Symposium** will be held on **February 20-21, 2020**. This two-day CME live activity will take place at the **Westin Galleria Dallas, 13340 Dallas Parkway, Dallas, TX 75240** and is sponsored by UT Southwestern Department of Neurology and Neurotherapeutics, and the Office of Continuing Medical Education at UT Southwestern Medical Center.

A clinical education experience for members of multidisciplinary teams who care for patients with rare, complex neuromuscular diseases including hereditary muscular dystrophies, motor neuron diseases, neuroimmunologic neuropathies and rare genetic disorders of muscle and nerve. The 2020 keynote speaker will present data from the latest clinical trials for Duchenne muscular dystrophy and discuss new approaches for combination therapy in those patients. Case presentations will include physical diagnosis and discussion of management and new therapies by participating experts.

The content of the program is identified and developed through a Call for Abstracts process. The educational format for this activity includes didactic lectures with in depth Q&A, and panel discussions designed for active participation by attendees.

This program is specifically designed for Primary Care providers, Neurologists, NPs, PAs, and Researchers that desire to gain advanced knowledge in diagnosis and management of patients with neuromuscular disease.

\*\*For a detailed agenda go to <https://cme.utsouthwestern.edu/rp2002b>

We are asking for your support of this program with an exhibit fee listed below or on the Exhibitor Agreement form.

### **Benefits of Exhibiting ....**

Meet one-on-one to discuss your products and services with medical professionals who will attend this meeting. Further benefits of exhibiting at the **42nd Annual Carrell Krusen Symposium** includes:

- Exposure to over 200 of attendees. Approximately **75%** of the attendees are physicians
- Ample intermissions between morning and afternoon sessions allow time for attendees to visit your exhibit
- Breakfast and coffee breaks are held in the exhibit area during session intermissions to help increase traffic flow
- Build visibility for your company in a competitive marketplace
- Expand your prospective place and strengthen existing customer relationships

We look forward to your support and participation.

**Location:**

The Westin Galleria Dallas  
 13340 Dallas Parkway  
 Dallas, TX 75240  
 972-934-9494

**Parking:**

Complimentary on-site parking

Valet parking, fee: 28 USD daily. (Valet Parking: 0-2 hours = \$10, 2-4 hours = \$16, 4-8 hours = \$20, Overnight (8+ hours) = \$28 Tax not included.

**Valet parking will not be validated.**

**Exhibitor Levels and Benefits:**

Your company can support this program with an exhibit fee in the following amounts:

<b>Exhibitor</b>	<b>\$2500.00</b>	one 6 foot table and two (2) chairs, with two (2) complimentary representative registrations
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**Other Sponsorship Opportunities:**

<b>Thursday Breakfast</b>	<b>\$6,000</b>	Includes poster with company logo to acknowledge sponsorship, one 6 foot table with two (2) chairs, and three (3) complimentary representative registrations
<b>Friday Breakfast</b>	<b>\$6,000</b>	Includes poster with company logo to acknowledge sponsorship, one 6 foot table with two (2) chairs, and three (3) complimentary representative registrations
<b>Thursday Lunch</b>	<b>\$10,000</b>	Includes poster with company logo to acknowledge sponsorship, one 6 foot table with two (2) chairs, and four (4) complimentary representative registrations
<b>Friday Lunch</b>	<b>\$10,000</b>	Includes poster with company logo to acknowledge sponsorship, one 6 foot table with two (2) chairs, and four (4) complimentary representative registrations
<b>Conference Wi-Fi</b>	<b>\$10,000</b>	Includes poster with company logo to acknowledge sponsorship, one 6 foot table with two (2) chairs, and up to (4) complimentary representative registrations

If you wish to register additional representatives, the registration fee is \$225/each. Go to <https://cme.utsouthwestern.edu/rp2002b> and follow instructions. All representative registrations include reception admission.

Your support as an exhibitor will be fully acknowledged at the course and you will receive recognition in announcements from the course directors at the meeting, signage and course handouts.

**Conference and Exhibit Details:**

General Session	San Antonio Ballroom	
Exhibit Location:	The Westin Galleria- 3 <sup>rd</sup> floor- San Antonio Ballroom Foyer	
Exhibit Space:	Assigned exhibit space consists of one 6-8 foot table and two (2) chairs.	
Exhibit Dates/Times:	Set up on <b>Thursday, February 20 at 6:00am</b> . Exhibits during registration, breakfast, breaks and lunch, starting <b>February 20 at 7:00am</b> through <b>February 22 at 2:00pm</b> .	
	If you require electricity for your table, please notify hotel in advance so that they are able to accommodate. Any cost associated will be the responsibility of each company.	
Incoming Shipping Instructions:	The Westin Galleria Dallas 13340 Dallas Parkway Dallas, TX 75240	<ul style="list-style-type: none"><li>• <b>Your packages should arrive no sooner than <b>Tuesday, Feb. 18, 2019</b></b></li><li>• <b>Be sure to monitor your shipment and bring your tracking number(s) with you.</b></li></ul>

**Required Form:**

Included in this package is the Exhibitor Agreement form required. Please complete the 2 page form and return to Laura Hall at [laura.hall@utsouthwestern.edu](mailto:laura.hall@utsouthwestern.edu) or fax to 214-648-2317 by **February 7, 2020**

**Confirmation & Payment**

Exhibit space is not confirmed until an Exhibitor Agreement form is completed and signed by both parties. A counter-signed copy of the agreement will be sent back as confirmation of your exhibit space along with a receipt if paid by credit card. **Payment must be received prior to the start of the course.**

Please make checks payable to UT Southwestern/Continuing Education, and reference to program **RP2002B**.

Mail checks to:           UT Southwestern Medical Center  
                                  Office of Continuing Education  
                                  5323 Harry Hines Blvd., Mail Code 9059  
                                  Dallas, TX 75390-9059

An invoice may be provided upon request. Please send requests/payments to:

Attn: Laura Hall  
UT Southwestern Medical Center  
Continuing Medical Education  
5323 Harry Hines Blvd. Mail code 9059  
Dallas, TX 75390-9059.  
Tax ID # 75-6002868

**Attendee Lists:**

Attendee lists will be provided upon request at the program **only**. As a health care provider, we must respect the privacy of our attendees. Therefore only limited attendee contact information will be provided to exhibiting companies (name, affiliation, city and state). Telephone, fax, email and street addresses will not be distributed.

**Exhibit Space Cancellations:**

Cancellations must be received in writing at least ten business days prior to the start of the course. If a cancellation is received after this time, no refund will be provided.

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**UT Southwestern**  
Medical Center

**OFFICE OF CONTINUING MEDICAL & PUBLIC EDUCATION**

**EXHIBITOR AGREEMENT**

*Regarding the Terms and Conditions for a Commercial Exhibit*

<b>Activity Name</b>	42nd Annual Carrell Krusen Symposium	<b>Activity #</b>	RP2002B
<b>Location</b>	The Westin Galleria Dallas	<b>City</b>	Dallas
		<b>ST</b>	Texas
<b>Dates</b>	February 20-21, 2020		
<b>Agreement between</b>	ACCREDITED PROVIDER (PROVIDER) The University of Texas Southwestern Medical Center (UTSW) AND COMMERCIAL COMPANY (EXHIBITOR)		
<b>Company Name</b>			
<b>Address</b>			
<b>City</b>		<b>ST</b>	
		<b>Zip</b>	
<b>Contact Telephone</b>		<b>Fax</b>	

Exhibitor Information	
<b>Contact Name</b>	<b>Email</b>
<b>Telephone</b>	<b>Cell</b>

**TERMS AND CONDITIONS**

- EXHIBITOR agrees to abide by ACCME Standards for Commercial Support as stated at [www.accme.org](http://www.accme.org) SCS 4.2 For live, face-to-face CME, advertisements and promotional materials cannot be displayed or distributed in the educational space immediately before, during, or after a CME activity. Providers cannot allow representatives of Commercial Interests to engage in sales or promotional activities while in the space or place of the CME activity.
- EXHIBITOR may distribute promotional materials at their exhibit space only. Distribution of pharmaceuticals or other samples is prohibited.
- All commercial support associated with this activity will be given with the full knowledge of the PROVIDER. No additional payments, goods, services or events will be provided to the course director(s), planning committee members, faculty, joint sponsor, or any other party involved with the activity.
- Completion of this agreement represents a commitment and payment is due and collectible by the ACTIVITY DATE unless otherwise agreed upon by the PROVIDER. PROVIDER reserves the right to refuse exhibit space to EXHIBITOR in the event of nonpayment.
- PROVIDER agrees to provide exhibit space and may acknowledge EXHIBITOR in activity announcements. PROVIDER reserves the right to assign exhibit space or relocate exhibits at its discretion.
- PROVIDER Federal Tax ID number is 75-6002868.  
Please remit check payable to UT Southwestern Medical Center. Please identify name of course on the check stub.

**AGREED**

**EXHIBITOR Representative**

**Signature** \_\_\_\_\_

**Name** \_\_\_\_\_

**Title** \_\_\_\_\_

**Date** \_\_\_\_\_

**PROVIDER Representative**

**Signature** \_\_\_\_\_

**Name** Ericka Harden-Dews, JD, CHCP

**Title** Director, Office of Continuing Education & Public Education

**Date** \_\_\_\_\_

**EXHIBITOR REGISTRATION AND PAYMENT FORM****Activity Name** 42nd Annual Carrell Krusen Symposium**Activity #** RP2002B**Exhibit Space Information**

<input type="checkbox"/>	Level	Amount	Description
<input type="checkbox"/>	Exhibitor	\$	

**Other Sponsorship Opportunities**

<input type="checkbox"/>	Level	Amount	Description
<input type="checkbox"/>	Thursday Breakfast	\$6,000	Includes poster with company logo to acknowledge sponsorship, one 6 foot table with two (2) chairs, and three (3) complimentary representative registrations
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<input type="checkbox"/>	Conference Wi-Fi	\$10,000	Includes poster with company logo to acknowledge sponsorship, one 6 foot table with two (2) chairs, and up to (4) complimentary representative registrations

**Payment Information**

<input type="checkbox"/>	Check enclosed	<input type="checkbox"/>	Check will be mailed				
<input type="checkbox"/>	Credit Card	<input type="checkbox"/>	Visa	<input type="checkbox"/>	MasterCard	<input type="checkbox"/>	AMEX
	Credit Card Number					Exp.	
	Name on Card					Sec.	
	Billing Address					Code	
	City	ST				Zip	

**Remittance Information**

Mail	UT Southwestern Medical Center Office of Continuing Medical & Public Education 5323 Harry Hines Blvd., Mail code 9059 Dallas, TX 75390-9059
Fax	214-648-2317
Email	Laura.Hall@utsouthwestern.edu

Agreement must be received by February 7, 2020**\*\*Before sending, please double check the following to avoid any delay in getting your request processed:**

- Exhibitor agreement form is completed and signed
- If paying by credit card, make sure you include the expiration date and security code
- Include program number **"RP2002B"** on all correspondence and payments