

Invitation to Sponsor or Exhibit
Sponsorship/Exhibitor Prospectus and Opportunities

Primary Care Focus Symposium, 18th Annual

Friday-Sunday, July 12-14, 2019
The Ritz-Carlton, Naples, Florida

Presented by
Baptist Health South Florida

On behalf of Baptist Health South Florida, we would be pleased if you would join us as a Sponsor at our **18th Annual Primary Care Focus Symposium**, Friday-Sunday, July 12-14, at The Ritz-Carlton in Naples, Florida.

Overview:

The primary care practitioner has the special and important responsibility to diagnose and manage patients with every category of ailment, injury and disease. This symposium will provide practical, evidence-based strategies to strengthen healthcare competencies. Expert faculty will explain recent advances in diagnosis, management and treatment and address compelling issues on relevant topics related to primary care practice today.

Networking Opportunities

When you participate in this CME/CE event you will network one-on-one with the physicians, leaders and healthcare providers affiliated with Baptist Health South Florida, and with participants from the greater South Florida medical community, as well as those from around the United States and abroad.

Sponsorship Opportunities

As a **Gold Level Sponsor**, your company will also be recognized for one year as a *Corporate Philanthropy Partners* program member of Baptist Health. Distinct and significant recognition will be provided at the symposium, as well as at the luncheon, in the conference hall and on the website in advance of the symposium. Details are on the following pages.

Target Audience: General Internists, Primary Care Physicians, Family Physicians, Urgent Care Physicians, Hospitalists, Psychologists, Physician Assistants, Nurse Practitioners, Nurses, Dietitians, Pharmacists and Respiratory Therapists.

On behalf of Baptist Health's Continuing Medical Education Department, thank you for your consideration.

A. Ruben Caride, M.D., Symposium Director

Exhibit Hall and Exhibit Space Details

Primary Care Focus Symposium, 18th Annual

Sponsors and Exhibitors will be provided with booth space in the exhibit area adjacent to the conference sessions. Booths consist of a six-foot table, covered and skirted. A representative from the Baptist Health CME Department will be in contact with you to provide directions to the Exhibit Hall along with confirmation of all conference details.

Exhibit Hall Hours, Setup and Teardown

- **Exhibit Hours:** Friday: 1-6 p.m. ■ Saturday: 7:15 a.m.-12:30 p.m. ■ Sunday: 7:15-11:30 a.m.
- **Setup:** Exhibit Hall will be available Thursday, July 11, starting at 6 a.m. ■ Setup must be completed by Friday, July 12, at 11 a.m. ■ Your assigned table will be marked with your company name.
- **Breakdown/Removal:** After adjournment at 11 a.m. on Sunday, July 14.

IMPORTANT: Representatives are responsible for transporting their displays and materials on symposium days. Please be aware that the hotel charges for storage, shipping and receiving services.

Shipping, Delivery and Return of Exhibit Booth Materials

- Mark your packages clearly with your company name and the name of the symposium.
- If you plan to ship your materials to the hotel: (1) Contact Baptist Health CME to obtain a hotel shipping form. (2) Schedule your shipment to arrive by **Thursday, July 11**. (3) Have your FedEx number handy in case you are unable to locate your package. (4) Properly marked boxes will be delivered to your booth the afternoon of **Thursday, July 11**. (5) Ship properly marked boxes to:

The Ritz-Carlton Naples

280 Vanderbilt Beach Road, Naples, FL 34108

Ref: Baptist Health South Florida Primary Care Focus Symposium

July 12-14, 2019

(Your Name – Company Name)

- Outgoing packages must be marked properly. You may leave properly marked packages in the Exhibit Hall. The hotel will ship them according to the label instructions on your package.

Cancellations and Refunds

Baptist Health will not refund any fees paid under this agreement in the event the company cancels or does not use the exhibit space.

Exhibitor Participation Form and Name Badges

Please complete the Exhibitor Reservation form on pages 4 & 5. Be sure to include the names of all representatives participating. Name badges must be worn at all times to identify representatives as conference participants.

Attending Symposium Sessions

Exhibitors who wish to obtain credit for attending the symposium should register in advance online; registration fees apply. Representatives of commercial interest companies are prohibited from discussing their company, brands or products while in the education space.

Security

Sponsors and Exhibitors may leave their displays in the Exhibit Hall overnight; however, we recommend you do not leave any items of value (computers, cell phones, etc.). Neither the hotel nor Baptist Health will be responsible for loss of or damage to any property. Sponsors and Exhibitors agree to maintain responsibility for safeguarding their goods, materials, equipment and exhibits at all times.

Location and Accommodations

Baptist Health has secured a block of rooms at The Ritz-Carlton at a special group rate of \$239 per night, plus applicable taxes and hotel fees. Visit PrimaryCareFocus.BaptistHealth.net to connect to the hotel to reserve at this group rate. The special group rate ends **June 16, 2019**.

Confirming Your Participation and Payment

To confirm your participation, please complete the attached Confirmation Form (pages 4 & 5).

NEXT STEPS: Confirm Sponsor Level by **June 28**, and submit payment by **July 8**. Complete and submit the **Confirmation Form** (pages 4 & 5). **NOTICE:** If payment is not received by **July 8**, confirmed Sponsor may not be recognized or included in print materials.

Sponsor & Exhibitor Support Levels
Primary Care Focus Symposium, 18th Annual

LEVEL	GOLD SPONSOR	SILVER SPONSOR	EXHIBITOR
RECOGNITION	\$10,000	\$5,000	\$2,500
Prestigious recognition as a <i>Corporate Philanthropy Partners</i> member of Baptist Health Foundation through signage at year-round Foundation events and Baptist Health hospitals, on the Foundation website and in publications and communications to the health system leadership and board members.	•		
FRIDAY RECEPTION – Limited to 2 Name/Logo** recognition on prominently displayed posters at event, in symposium handout, on website and in scrolling welcome PowerPoint slides.	2		
SATURDAY – Breakfasts and Breaks – Limited to 2 Name/Logo** recognition on prominently displayed posters at event, in symposium handout, on website and in scrolling welcome PowerPoint slides.		2	
SUNDAY – Breakfast – Limited to 2 Name/Logo** recognition on prominently displayed posters at event, in symposium handout, on website and in scrolling welcome PowerPoint slides.		2	
LUNCH SPONSOR – Limited to 2 Name/Logo** Sponsor acknowledgment on signage prominently displayed where lunch is served. Additional recognition (verbal) during morning and afternoon session opening remarks.	2		
AUDIOVISUAL SPONSOR – EXCLUSIVE – Limited to 2 Name/Logo** recognition displayed on signage in conference room and in the handout.	2		
POWERPOINT RECOGNITION Looping presentation in the conference room before conference and during breaks. <i>COMPANY NAME SIZE & LOCATION DISTINGUISHED BY LEVEL OF SPONSORSHIP.</i>	•	•	
EXHIBIT – PREMIUM Prime space placement in Exhibit Hall. Two 6-foot tables or extra space for floor display. Electric included.	•	•	
EXHIBIT – STANDARD Table-top display. One 6-foot table.			•
EVENT WELCOME SIGNAGE Name/Logo** recognition as a 2019 SPONSOR on prominently displayed directional/welcome signage.	•	•	
REPRESENTATIVE BADGES Name badges for representatives (meals included).	•	•	•
CONTINENTAL BREAKFAST AND REFRESHMENTS In the Exhibit Hall	2	2	2
ADMISSION TO LUNCHEON Poolside	•		
NETWORK Opportunity to interact with physicians and attendees.	•	•	•

** Logo recognition can be used for non-commercial interest companies only.



CONFIRMATION FORM

Sponsors and Exhibitors – Submit by Friday, June 28.

Company: _____ **Contact Person:** _____

Title: _____ **Email address:** _____

Address: _____ **City:** _____ **State:** _____ **ZIP:** _____

Telephone: _____ **Fax:** _____

Sponsorship and Exhibits Includes Exhibit Booth	<input type="checkbox"/> \$10,000 Gold	<input type="checkbox"/> \$5,000 Silver	<input type="checkbox"/> \$2,500 Exhibitor

NAME BADGE REQUEST for Exhibit Booth Representatives Please print names of representatives who will be exhibiting at the symposium. Please refer to Sponsorship/Exhibitor Prospectus for the number of invited representatives based on the level of support.

Name: _____

Name: _____

Name: _____

Name: _____

CONFIRMATION AND PAYMENT

1 – Return this Confirmation Form with the Signed Terms and Conditions (page 6) by June 28 to secure your space.

2 – Make full payment based on your level of support by July 8.

MY PAYMENT IS FOR A GOLD SPONSORSHIP. *(Exhibit Space included.)*
 Contact **Laura Denoux**, Baptist Health South Florida Foundation, LauraDen@BaptistHealth.net or 786-467-5404.

Check – Payable and Mailed to: Baptist Health South Florida Foundation (tax ID number 59-1923401)
 Attn: Primary Care Focus Symposium, 6855 Red Road, Coral Gables, FL 33143

Credit Card – Contact **Laura Denoux**

MY PAYMENT IS FOR A SILVER OR BRONZE SPONSORSHIP. *(Exhibit Space included.)*
 Contact **Julie Zimmatt**, Baptist Health CME Department, JulieZ@BaptistHealth.net or 786-596-8612.

Check – **Payable and Mailed to:** Baptist Health CME Department (tax ID number 65-0267668)
 Attn: Julie Zimmatt, 8900 N. Kendall Drive, Miami, FL 33176

Credit Card – [Online Payment](#)

Terms and Conditions for Baptist Health CME Exhibitors

For the purpose of this agreement, "Exhibitor" refers to the Company(ies) represented at this event as well as the Company's(ies) representative(s) present at this event; and "Baptist Health" refers to Baptist Health South Florida, its affiliates, subsidiaries, contractors, departments and/or employees.

- Exhibitors may not place brochures, marketing materials or flyers outside of that company's assigned exhibit space.
- Exhibitors may not affix anything to the walls, doors, floors or columns of the exhibit hall or symposium space.
- All illuminated displays and other equipment requiring electrical current must conform to local electrical codes. All extension cords must be 3-wire grounded and UL approved.
- Subletting of exhibit space is not permitted.
- Baptist Health will not refund any fees paid under this agreement if the company cancels or does not use the exhibit space.
- Baptist Health CME reserves the right to (a) reject any exhibit application; (b) reject, prohibit, restrict or otherwise require modification of any exhibit for any reason; and (c) evict or ban any exhibitor whose exhibit, materials or conduct is objectionable for any reason.
- Violation of any regulations on the part of the exhibitor, its employees or agents shall void the right to occupy space, and such exhibitor will forfeit to Baptist Health CME all monies that may have been paid.
- Upon evidence of violation, Baptist Health CME may take possession of the space occupied by the exhibitor and may remove all persons and goods at the exhibitor's risk. The exhibitor shall pay all expenses and damages that Baptist Health may thereby incur.
- Exhibitor agrees to be responsible for his/her own property and acknowledges that neither Baptist Health nor the facility assume responsibility for damage to, loss of or theft of property.
- Exhibitor shall release and hold harmless and indemnify Baptist Health from any and all claims, obligations, liabilities, causes of action, lawsuits, damages and assessments, including legal fees, that result from an allegation of negligence on the part of the exhibitor or Baptist Health or third parties in the use of the exhibit space or activities in connection with the use of the exhibit space.

Special Accessibility Needs

In accordance with the Americans with Disabilities Act, Baptist Health CME will make all reasonable efforts to accommodate persons with disabilities at this symposium. Please notify the CME Department by June 28 by contacting Julie Zimmitt at 786-596-8612 or JulieZ@BaptistHealth.net.

Agreement Statement

_____ (Initials) YES, I have read and understand the Baptist Health CME Exhibitor Terms and Conditions and agree to participate in the **2019 Primary Care Focus Symposium** as an exhibitor as indicated in this contract.

NAME (print): _____ Authorized Exhibitor
Representative

SIGNATURE: _____ DATE: _____

If you have any questions, please contact:

Julie Zimmitt | Phone: 786-596-8612 | Fax: 786-533-9706 | Email: JulieZ@BaptistHealth.net
Continuing Medical Education Department, 8900 N. Kendall Drive, Miami, FL 33176 | Main: 786-596-2398

Thank you!