



**North Carolina Biomedical Association
Vendor Information and Agreement**

**7474 Creedmoor Road, PMB 196
Raleigh, North Carolina 27613-1665
Ph: 919- 688-6890**

Federal Tax ID # 58-1474079

The North Carolina Biomedical Association will hold its 30th Annual Symposium **December 1 – 3, 2008** at Pinehurst Resort & Country Club in the Village of Pinehurst, North Carolina. Enclosed you will find a tentative Schedule of Events and Vendors Information and Agreement.

The Cardinal Ballroom Information Booths

The Cardinal Ballroom is being made available again in 2008 for vendors that would like more exposure time than the traditional exhibit hall affords. In 2008, the Cardinal Ballroom will serve as the hub of activity for the NCBA 2008 Annual Symposium. Fifteen booths will be available for vendors to display information, answer questions and talk to attendees. The Cardinal Ballroom will house the NCBA registration area, food for all breaks during the symposium and selected meals. Vendors will have access to attendees from start to finish for the 2008 NCBA Annual Symposium. Up to 26 hours of attendee exposure compared to 10 hours in the Exhibit Hall!

North Carolina Biomedical Association 2008 Annual Symposium Vendor Schedule

Monday, December 1, 2008													
Cardinal Ballroom	Sunday Eve.	7	8	9	10	11	12	1	2	3	4	5	6
Vendor set up													
Registration, Breaks and Classes													
Exhibit Hall Opening Reception													

Tuesday, December 2, 2008														
	8	9	10	11	12	1	2	3	4	5	6	7	8	9
Registration, Breaks and Classes														
Vendor Social and Dinner														

Wednesday, December 3, 2008														
	8	9	10	11	12	1	2	3	4	5	6	7	8	9
Registration, Breaks and Classes														
Final Exhibit Removal														

To encourage attendee participation, vendors are encouraged to have door prizes available that will be drawn during the symposium. Forms will be available at each booth that will be completed to be eligible for the drawing. Winners must be present to win and if not, drawings will continue until a winner accepts the prize.

All booths are \$600.⁰⁰. Vendors are limited to one (1) booth in this area. Two attendees are allowed per rented booth. Additional representatives are welcome at a cost of \$165.⁰⁰ each. Each booth will be 6' x 10', have one draped table, two chairs and electricity. (Vendor must provide extension cords). Included with booth purchase are meals, free advertisement in the NCBA Newsletter (two half-page ads) and two non-voting memberships in the NCBA for each booth purchased. The advertising copy, for Newsletter, must be camera ready or set-up charges will be made.

Please indicate on the registration form your attendance for meals so that we can plan appropriately



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The Cardinal Ballroom Information Booths

NCBA Exhibit Space Selection for 2008 NCBA Annual Symposium

Space selection for the 2008 NCBA Annual Symposium began at the 2007 NCBA Annual Symposium. Vendors preselected spaces based off the 2007 point system. Any available spaces will be made available to all vendors on July 1, 2008. A new point system for 2009 will allow each vendor to select booth space in the most fair and equitable manner.

NCBA Cardinal Ballroom 2009 Space Selection Point System

NCBA calculates the number of each vendor's points based on the following criteria:

- 5 points for 2007 and 2008 NCBA Corporate Membership. Corporate Membership must be current and paid prior to selection. These points are only for the current year and are not cumulative.
- 5 points for each booth purchased for the NCBA 2007 and 2008 Annual Symposium.
- 5 points for each booth purchased for the NCBA 2006 Annual Symposium Exhibit Hall.
- For being an NCBA 2008 Annual Symposium Gold Sponsor (20 points), Silver Sponsor (15 points) or Bronze Sponsor (10 point).
- **25 points will be deducted for vendors that leave early!**
- Point ties are decided by the first date of receipt of payment for the NCBA 2008 Annual Symposium Exhibit Hall.

Example: Vendor Example Co. is an NCBA Corporate Member and a Silver Sponsor. Their total points would be 7. (5 – Corporate Membership, 2 – Silver Sponsorship)

Vendors may set up Sunday evening, November 30, or before 8 am on Monday, December 1.

These booths are intended for information sharing only. Large medical equipment or portable/on-wheels devices are restricted from this area. Information and information systems must not require more than one electrical outlet. Everything must be able to be displayed on the one table provided. Freestanding displays are allowed as long as it fits within the 6' x 10' space.

Please let us know early if you have special needs in your booth area. Items such as phone lines, LAN connections, broadband connectivity and special electrical services are available at an additional charge. See the last page of this contract for pricing.

All displays must be taken down by 3:00 pm on Wednesday, December 3, 2008.

Please plan ahead and have all shipping labels and supplies ready for shipment of your product.

No displays will be permitted to be taken down prior to the Tuesday evening dinner.

Attention

Many vendors ask how they can do more to help the NCBA while maximizing their company's exposure.

30th Anniversary sponsorships are being accepted.

Sponsorships are available for:

Dinner \$10,000.⁰⁰

Lunch \$2,500.⁰⁰ - \$5,000.⁰⁰

Breaks \$1,500.⁰⁰

Golf Tournament Box Lunch \$1000.00

Contact Alan Koreneff at vendor2@ncbiomedassoc.com to arrange or discuss other means of sponsorship you may wish to support.

North Carolina Biomedical Association

Vendor Information and Agreement

- EVENT:** 30th Annual North Carolina Biomedical Association Symposium & Medical Equipment Exposition
- DATE:** Monday, December 1, 2008 – Wednesday, December 3, 2008
- PLACE:** Pinehurst Resort & Country Club
P.O. Box 4000
Village of Pinehurst, North Carolina 28374
- EXHIBITOR'S FEES:** The fee is \$600.⁰⁰ per booth, which includes one 6' x 10' booth, draped table, electricity (extension cords not provided), sign for booth, annual NCBA dues, and advertising (two half-page ads in the association's bi-monthly newsletter), tickets to Monday's social and Tuesday's lunch, social and dinner for two people. Additional paid registrants will also receive the same social and meal tickets.
- Late fee of \$150.⁰⁰ after October 31, 2008.**
- PAYMENT FOR SPACE:** Payment for the booth MUST be returned with the attached Vendor Agreement. We are pleased to be able to offer on-line payment processing through the PayPal secure, encrypted system, utilizing an existing PayPal account or with your Visa or MasterCard. If using PayPal, please email contract to the Vendor Coordinator, print and sign a hardcopy of the contract and mail it to the NCBA address provided.
- INSTALLATION OF EXHIBITS:** Piping and drapes will be set up for booths on Sunday, November 30, 2008. Vendors will have access to Cardinal Ballroom area, Sunday evening, November 30, and Monday morning before 8 am for setup.
- CHARACTER OF EXHIBITS:** The NCBA reserves the right to decline or prohibit any exhibit or part of an exhibit booth activity, which in its opinion is unsuitable.
- EXHIBIT HOURS:** Exhibits will be located in the Cardinal Ballroom throughout the 2008 NCBA Annual Symposium.
- GUARD SERVICES:** A security service will be contracted in the Exhibit Hall area during the hours of: 9:00am December 1, 2008 till 12:00pm December 3, 2008.
- REMOVAL OF EXIBITS:** Removal of exhibits may commence after 3:00pm Wednesday, December 3, 2008.
- RESPONSIBILITY:** The exhibitor assumes entire responsibility and, hereby, agrees to protect, indemnify, defend, save, and hold harmless THE NORTH CAROLINA BIOMEDICAL ASSOCIATION and their agents, against all claims, losses and damages to persons or property, governmental charges, or fines and attorney fees

arising out of or cause by Exhibitor's installation, removal, maintenance, occupancy or use of the exhibition premises or a part, thereof, excluding any such liability caused by the sole negligence of THE NORTH CAROLINA BIOMEDICAL ASSOCIATION and their agents.

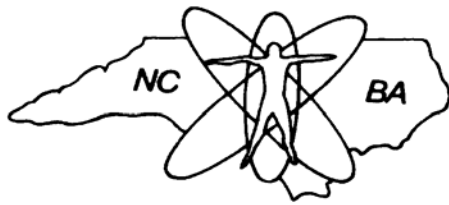
In addition, Exhibitor acknowledged that the NORTH CAROLINA BIOMEDICAL ASSOCIATION does not maintain insurance covering Exhibitor's property and that it is the sole responsibility of the Exhibitor to obtain business interruption and property damage insurance covering such losses by the Exhibitor.

CANCELLATION OF SPACE:

Any cancellation after October 31, 2008 will result in NO REFUND of exhibitor's fee unless a Vendor on the waiting list can take your place. A FULL REFUND will be given if you notify the NCBA Vendor Coordinator AND another Vendor can take your place.

NOTE:

Please sign and return the enclosed **VENDOR CONTRACT** by October 31, 2008. Confirmation of vendor spaces requires receipt of payment and contact from vendor coordinator in order for our association to assign a booth.



**North Carolina Biomedical Association
30th Annual Symposium & Expo
Vendor Contract**

December 1 - 3, 2008

Please retain one copy for your records and return one copy with payment to the address in Section 6.

Confirmation will be sent by e-mail to contact #1 as listed in Section 2.

1	COMPANY INFORMATION	2	BOOTH SPACE REQUIRED
Company Name _____ Address _____ Address 2 _____ City, State, Zip _____ Phone _____ Fax _____ Web Address _____		Number of Booths (limited to 1) _____ X \$600.⁰⁰ each = _____ Two representatives are allowed access per booth rented. Please list below. Use back if needed for additional booths. #1 Name _____ Address _____ City/State/Zip _____ Phone _____ Fax _____ Email _____ <p style="text-align: center;"><i>Required for e-mail confirmation</i></p> #2 Name _____ Address _____ City/State/Zip _____ Phone _____ Fax _____ Email _____	
3	ADDITIONAL GUESTS/REPRESENTATIVES		
Each booth rented above allows two persons access. Additional guests or representatives may attend at a cost of \$165. ⁰⁰ each. Use back to list these. Additional Guests/Representatives _____ x \$165.⁰⁰ each = _____ Payments over \$3000.00 must be made by Check!!! Total Guest/Representatives attending sponsored meals: _____			

4 NCBA SYMPOSIUM SPONSORSHIP	6 PAYMENT INFORMATION
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YES, I would like to purchase the following sponsorship:

***** GOLD LEVEL *****

	Amount	\$ _____
<input type="checkbox"/> Dinner (Tuesday)	\$10,000.00	\$ _____
<input type="checkbox"/> Lunch (Monday)	\$2,500.00	\$ _____
<input type="checkbox"/> Lunch (Tuesday)	\$5,000.00	\$ _____
<input type="checkbox"/> Lunch (Wednesday)	\$2,500.00	\$ _____

***** SILVER LEVEL *****

<input type="checkbox"/> Break AM (Monday)	\$1,500.00	\$ _____
<input type="checkbox"/> Break PM (Monday)	\$1,500.00	\$ _____
<input type="checkbox"/> Break AM (Tuesday)	\$1,500.00	\$ _____
<input type="checkbox"/> Break PM (Tuesday)	\$1,500.00	\$ _____
<input type="checkbox"/> Break AM (Wednesday)	\$1,500.00	\$ _____
<input type="checkbox"/> Break PM (Wednesday)	\$1,500.00	\$ _____
<input type="checkbox"/> Golf Box Lunch (Wednesday)	\$1,000.00	\$ _____

***** BRONZE LEVEL *****

	Quantity	\$ _____
<input type="checkbox"/> \$500.00 Donation	x _____	\$ _____

***** DONATION NCBA *****

	Quantity	\$ _____
<input type="checkbox"/> \$100.00 Donation	x _____	\$ _____

Total \$ _____

Section # 2	Enter subtotal \$ _____
Section # 3	Enter subtotal \$ _____
Section # 4	Enter subtotal \$ _____
<i>Sub-total</i>	\$ _____

\$150 late fee if postmarked after October 31, 2008.
(Late fee if applicable) \$ _____

Total \$ _____

If not using Paypal please make check payable to **NCBA**.
A signed copy of this contract must be mailed to:

North Carolina Biomedical Association
7474 Creedmoor Road, PMB 196
Raleigh, North Carolina 27613-1665

Phone 919-688-6890 [NCBA voicemail]

(Payment is required to process your registration and assign your booth.)

AUTHORIZATION SIGNATURE

5 LOCATION PREFERENCE

Please indicate if your booth space from the 2007 symposium was satisfactory.

Yes _____ No _____

Comments:

Describe the profile of your business, (example; medical equipment, test equipment, supplies, etc.)

I hereby apply for the above exhibit space at the 30th Annual North Carolina Biomedical Symposium.

I acknowledge that I have read the Vendor Information and Agreement and will abide by the conditions as outlined in it.

Name (Print) _____

Signature _____

Date _____

Pinehurst Hotel Exhibitor "Additional" Electrical Services Request Form

Overall Tradeshow Group Name: NC Biomedical Association 30th Annual Symposium

CSM: Andrew Duncan

Exhibitor Set-Up Date: **Monday, December 1, 2008** @ **Time:**

Exhibitor Teardown Date: **Wednesday, December 3, 2008** @ **Time:**

Exhibitor Name: _____

TYPE:	# NEEDED	CHARGE PER LINE
Standard 120 Volt Outlet		\$ 75.00
Standard 208 Volt Outlet		
**20 Amp/1 Phase		\$ 75.00
**20 Amp/3 Phase		\$100.00
**30 Amp/1 Phase		\$125.00
**30 Amp/3 Phase		\$150.00
**60 Amp/1 Phase		\$200.00
**60 Amp/3 Phase		\$225.00
Additional Electrical Services		
** 25 ft /1 outlet extension cord		\$25.00
** 50 ft /1 outlet extension cord		\$50.00
**100ft /1 outlet extension cord		\$75.00
**Multiple outlet power strip		\$25.00
Internet Connectivity		
High Speed Internet Access (Broadband)	[]	\$250.00 per line per day
4-line Hub for Multiple Connections	[]	\$50.00 per hub per day
Conventional Dial-Up	[]	\$75.00 per line per day
Exhibition Company Hired:		
	Yes	No

*Full payment must accompany this form or your order will not be processed. Services are not refundable for no-shows or unused items. Refunds will only be granted outside 14 days from the date power is needed. Note rates are established by the Pinehurst Resort.

Method of Payment (Checks Will Not Be Accepted by Pinehurst)

Type of Credit Card: _____

Card # _____ **Exp.** _____

Cardholder Name: _____

Exhibitor's Company Name: _____

Address: _____

Phone #: _____

Authorized Signer: _____ **Date:** _____

Return To:

PINEHURST Resort

Conference Services

80 Carolina Vista / PO Box 4000

Village of Pinehurst, NC 28374-4000

Resort Phone:

910-295-6811

Conference Services Fax:

910-235-8496

COMPLETED FORMS & PAYMENT ARE DUE MONDAY NOVEMBER 12, 2008.