



**The Advancing Science in Cardiovascular Care**  
**Maine Cardiovascular Health Council's Annual Summit**  
 November 9, 2017  
 The Samoset Resort, Rockport, Maine

**Exhibitor Participation Form**

Company Name: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Person(s) staffing exhibit: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone #: \_\_\_\_\_

Email: \_\_\_\_\_

Send this form and remittance to:  
 Maine Cardiovascular Health Council  
 Attn: Diane Campbell  
 11 Parkwood Drive  
 Augusta, ME 04330

---

Make Checks Payable To:  
 Medical Care Development

	Exhibitor Type (Please check)	# of Tables	Fee per Table*	Amount Due
For Profit Exhibitor			\$650.00	
Non Profit Exhibitor			\$400.00	
Bronze Sponsor (\$500 - \$999)			\$150.00	
Sponsor (\$1,000 & above)			No Charge	
Lunch Only (no conference participation)			\$40.00	
			<b>Total Due</b>	

\*Fee includes: One table, chair, tablecloth, skirting, and wireless internet access. If you require electricity, let us know.  
 Please note: Exhibitors planning on attending the conference will need to register and pay the registration fee. For those staffing tables who only want to have lunch and not attend any sessions, there will be a \$40.00 fee.

**Place:** The Samoset Resort, Rockport, Maine

**Date:** Thursday, November 9, 2017

**Set up:** Wednesday, November 8 – 5:30 pm – 7:00 pm  
 Thursday, November 9 – 7:30 am – 8:30 am

**Exhibit Hours:** 8:00 am – 2:00 pm

**Questions:** Contact Diane Campbell  
[dianec@mcdph.org](mailto:dianec@mcdph.org)  
 207-622-7566, ext. 230

**Payment Method:**

A check is enclosed (payable to Medical Care Dev.)

Please bill me – PO# \_\_\_\_\_

Credit Card (MC/Visa)

Card #: \_\_\_\_\_

Exp. Date: \_\_\_\_\_ 3-digit code: \_\_\_\_\_

If card holder or billing address are different than above: \_\_\_\_\_

\_\_\_\_\_

**Please return form and payment no later than October 12, 2017.**

**SPACE IS LIMITED**  
**EXHIBIT SPACE WILL BE ASSIGNED ON A FIRST-COME, FIRST-SERVED BASIS**