



2023 Exhibitor & Sponsor Prospectus October 27-29, 2023

Grand Hyatt Tampa Bay • Tampa FL

Join Us!

For the 2023 Florida Chapter ACP Annual Scientific Meeting

- ★ Become one of the dozens of successful exhibitors to sponsor our event!
- ★ Expand your product's reach with over 300 Chapter member physicians in attendance!
- ★ Several pricing options for sponsorship and marketing opportunities!





Why Partner with the Florida Chapter American College of Physicians?

Florida Chapter ACP (FLACP) is Florida's largest medical specialty organization representing over 8,500 physicians specializing in general and subspecialty Internal Medicine. The mission of the FLACP is to enhance the quality and effectiveness of health care by fostering excellence and professionalism in the practice of medicine.

This exclusive annual event gathers together Doctors of Internal Medicine for three days of educational sessions, knowledge sharing, networking and exhibits. Internists specialize in adult medicine in both general and sub-specialty fields and focus on the prevention, detection and treatment of illnesses in adults. The practices reflected by our attendees range from private practice, multi-specialty practice, chief medical officers, medical directors, chief medical information officers, program directors, clerkship directors, hospitalists and academicians.

This event will provide opportunities to reach the 300+ physicians expected to attend.

Exhibitor Schedule (tentative)

Friday, October 27

6:45 - 7:30 am Setup

7:15 - 8:30 am Registration/Breakfast

10:15 -10:45 am Networking Break w/ Exhibitors 11:45 am - 1:00 pm Luncheon/Networking Break 3:30 - 4:00 pm Networking Break w/ Exhibitors

6:00 pm Meeting Adjourns

Saturday, October 28

7:00 - 8:30 am Registration/Breakfast
9:30 - 10:00 am Networking Break w/Exhibitors
12:00 - 1:30 pm Luncheon/Networking Break
3:30 pm Networking Break w/Exhibitors

5:45 pm Meeting Adjourns6:00 pm Poster Competition7:30 pm Governor Award Reception

Sunday, October 29

7:15 - 8:30 am Registration/Breakfast
11:00 am - 11:30 am Networking Break w/Exhibitors
1:00 pm Meeting adjourns

Exhibit Location and Host Hotel

Grand Hyatt Tampa Bay

2900 Bayport Drive Tampa, FL 33607 (813) 874-1234

Room Rate \$179 S/D **Room rate cut-off – 10/03/2023**

Please make your room reservations by calling (813) 874-1234 to request FL Chapter ACP group rate.

Shipments may arrive no earlier than October 25, 2023 Label: Company & Rep. Name, for FL ACP Annual Scientific Meeting 10/27/2023 – 10/29/2023



ExtendYour Reach~Collaborate

The FLACP Annual Scientific Meeting gives you a unique opportunity to collaborate and meet physicians in practice, as well as market your brand and discuss your services. This interactive environment puts you in close proximity to our educational events where physicians can be informed of your services and you can develop rewarding relationships and fruitful business opportunities!

Please note that full payment must be received with your signed application, the payment options are listed on exhibit registration page. The Florida Chapter ACP Tax ID# 59-6152179.

We offer our Basic Exhibit Package that covers the essentials, as well as Bronze, Silver, and Gold options that are more inclusive. A comprehensive package breakdown is on the following page.



The Basic Exhibit Package - \$2,000



All exhibitors and sponsors receive these core benefits:

- * Two (2) complimentary conference registrations to attend all functions
 - ★ One (1) exhibit table 6 feet long, two (2) chairs, standard electrical hook-up (electrical must be requested in advance)
 - ★ Company logo in program booklet
 - ★ Company logo on signage at registration area recognizing participation
 - ★ Final list of attendees (names/cities) at conclusion of conference
 - * Internet connection available for an additional fee



The Bronze Level Package - \$3,500



The Bronze Level Upgrade includes these additional benefits:

- * 1/4 Page Advertisement in program booklet
- ★ Exclusive Sponsorship of Networking Break



The Silver Level Package - \$5,000



The Silver Level Upgrade includes these additional benefits:

- ★ 1/2 Page Advertisement in program booklet
- ★ Exclusive co-Sponsorship of preferred Breakfast
- ★ Exclusive Sponsorship of Poster Competition



The Gold Level Package - \$7,500



The Gold Level Upgrade includes these additional benefits:

- ★ Full Page Advertisement in program booklet
- * Exclusive Sponsorship of preferred Luncheon
- * Exclusive Co-Sponsorship of the Awards Reception
- ★ Exclusive Sponsorship of Poster Competition

Full breakdown on following page -->



The Exhibit Packages



| | SPONSORSHIP LEVELS | | | | |
|---|--------------------|----------------|----------------|---------------|--|
| List of Additional Opportunities | Gold \$7,500 | Silver \$5,000 | Bronze \$3,500 | Basic \$2,000 | |
| Exclusive Co-Sponsorship of Poster Competition | ✓ | | | | |
| Exclusive Co-Sponsorship of Networking Break | ✓ | \ | ✓ | | |
| Exclusive Co-Sponsorship of Awards Reception | ✓ | ✓ | | | |
| Full Page Advertisement onsite | ✓ | | | | |
| 1/2 Page Advertisement onsite | | ✓ | | | |
| 1/4 Page Advertisement onsite | | | ✓ | | |
| Two complimentary conference registrations to attend all functions | ✓ | ✓ | ✓ | ✓ | |
| One 6 foot exhibit table, two chairs and electrical hook up (outlet must be requested in advance) | ✓ | ✓ | ✓ | ✓ | |
| Company logo on signage at registration area recognizing participation | ✓ | ✓ | ✓ | ✓ | |
| Company logo onsite program booklet | ✓ | ✓ | ✓ | ✓ | |
| Final list of attendees at conclusion of conference | ✓ | ✓ | ✓ | ✓ | |

Additional Support and Marketing Opportunity

Maximize your return on investment with additional support and marketing opportunities before and throughout the conference. Companies are invited to contribute to the meeting as supporters.

Please note that, in accordance with ACCME guidelines, exhibit space is separate from educational sessions.

Conference Seat Drop

\$650

Your company brochure or marketing flier will be placed on all seats during a meal function. Sponsor to provide item and ship directly to conference site. Item requires preapproval.



FL ACP Chapter Annual Scientific Meeting

Florida Chapter ACP - Dmoerings@floridachapteracp.org

Join the Dozens Who Have Participated in the Conference Before!

AdvantageINK.com

Allergy Easy

Ambry Genetics

American College of Physicians

Asante Communications, LLC

Astella Pharma

AstraZeneca Pharmaceuticals LP

Atlantic Health Partners

Bank United BioMedix

Bio-Reference Laboratories – an OPKO Health Co.

Boehringer Ingelheim Boston Scientific

CARR Healthcare Realty

ChenMed

Choice One Medical Group, LLC

CIGNA

Clinical Compound

Concierge Choice Physicians

The Center for Advancement of Health IT

Danna-Gracey deCode Genetics

Drug Enforcement Administration

EHRC Technologies Elite Imaging

Envision Physician Services Family Physicians Group

Florida Blue

FL Dept of Health, Bureau of Vital Statistics

FL Dept. of Health Div. of Medical Quality Assurance

Florida Medical Association

Florida Rx Card Genelex, Inc.

Gwinnett Medical Center

HCA - Hospital Corporation of America Health Care Advisor's Services, Inc.

Healthy Partners Hospitalists Plus

Humana Invitae

Iron Ridge Insurance ISA Medical Group Leaf Vertical Inc. ISA Medical Group

Medinteract, LLC

Medificeract, LLC

Medicus Healthcare Solutions Memorial Healthcare System

Merck & Co, Inc.

Millennium Laboratories Millennium Physician Group

Mitchell Capital Group

Mylan, Inc.

Myriad Genetic Laboratories, Inc.

Northeast Planning Corp. Orlando VA Medical Center Oppenheimer & Co, Inc.

Otsuka America Pharmaceuticals, Inc.

Pfizer, Inc. Privis Health

Quest Diagnostics, Inc. Radiology Response

Reckitt Benckiser Pharmaceuticals Rego International/Florida Bracing

Sanofi Diabetes

Seqirus

Selmer Scientific/FloChec

Shire

Signet Diagnostic Imaging Services South Beach Orthotics & Prosthetics South FL Regional Extension Center

Specialists on Call Success EHS Takeda

TEVA Respiratory The Doctors Company Trilogy Home Healthcare Trust Bridge Health TS Medical USA

U S Air Force Medical Recruiting U S Navy Medical Programs Recruiting USF Center for HIV Education & Research

Western Systems Research

FLACP Exhibit Policies

Things to Remember:

Exhibits are limited to those whose products and services are of interest to physicians in internal medicine & subspecialties.

Full payment is required with your signed application to reserve booth space. Upon receipt of payment, exhibitors will receive information outlining instructions for shipment and any special needs, such as internet access and electricity. (fees may apply). You will be centrally located in the registration area, between the general session, and concurrent sessions, which will ensure a good flow of traffic. In addition, the morning breakfast buffet/coffee breaks and afternoon breaks will be held within the exhibit area.

Sponsorships require pre-approval by American College of Physicians a separate Letter of Agreement will be provided for interested companies. For more information, please contact Dawn Moerings in the Chapter office at DMoerings@floridachapteracp.org or by calling (904) 355-0800.

Cancellation Policy

Once a formal application has been received; cancellations must be submitted in writing, no later than one month prior to the opening day of the meeting. A \$200 cancellation fee will be assessed. If no notification is provided, applying company will be responsible for the entire exhibit fee.





2023 Annual Scientific Meeting

October 27-29, 2023 Grand Hyatt Tampa Bay Tampa, FL

| EXHIBITOR ADVANCE REGISTRATION FORM | | | | | | |
|---|------------|-----------|------------------|-----------------------|--|--|
| Company Name | | | | | | |
| Contact Person | | | | | | |
| Title | | | | | | |
| Address | | | | | | |
| City | State Zip | | | Zip | | |
| Phone | Cell Ph | | | | | |
| E-Mail | | | | | | |
| EXHIBIT INFORMATION | | | | | | |
| Exhibit Type: |) 🔲 La | rger por | up (special requ | est/space permitting) | | |
| Type of product to be displayed: | | • | | <u> </u> | | |
| Please place my exhibit adjacent to: | | | | | | |
| Please DO NOT place my exhibit adjacent to: | | | | | | |
| Special requests: | | | | | | |
| Does your exhibit require electricity? ☐ Yes ☐ No | # of out | lets requ | ıested: | | | |
| Type of equipment requiring electricity: | 1 | | | | | |
| REGISTRATION FEES | | | | AMT DUE | | |
| Exhibit Fee (includes 2 Representatives) | | | \$2,000 | | | |
| Unrestricted Educational Grant (Bronze level) | \$3,500 | | \$3,500 | | | |
| Unrestricted Educational Grant (Silver level) | | | \$5,000 | | | |
| Unrestricted Educational Grant (Gold level) | \$7,5 | | \$7,500 | | | |
| Additional Representative and/or guests | # \$1 | | \$150 each | | | |
| ADDITIONAL MARKETING OPPORTUNITIES | | | | | | |
| | | | | | | |
| Conference Seat Drop | # | | \$650/day | | | |
| | | | TOTAL DUE | | | |
| PAYMENT METHOD | | | | | | |
| ☐ Check # (Make payable to FL Chapter ACP) ☐ AMEX | □ N | /lasterCa | rd 🗖 Visa | | | |
| ccount # Exp | | Exp Da | te | CVV# | | |
| Cardholder Name (print) | | | Phone # | | | |
| Cardholder Billing Address (include zip) | | | | | | |
| Cardholder Signature | | | | | | |

FL Chapter ACP 2023 Annual Scientific Meeting Exhibitor Registration

| Company Name | | | | | |
|--|-----------------|--|--|--|--|
| Complete for each representative attending. Please PRINT - this will be used for name badges (print additional copies if more than 4 reps attending) | | | | | |
| | | | | | |
| REPRESENTATIVE #1: (included in exhibit fee) | | | | | |
| Phone# | Cell# | | | | |
| E-mail | | | | | |
| ***Please check the functions you will be atted Friday Breakfast Saturday Breakfast Sunday Breakfast Sunday Breakfast | ending each day | | | | |
| DEDDECEMENTATIVE US | | | | | |
| REPRESENTATIVE #2: (included in exhibit fee) | | | | | |
| Phone# | Cell# | | | | |
| E-mail | | | | | |
| ***Please check the functions you will be atte Friday Breakfast Saturday Breakfast Sunday Breakfast Sunday Breakfast | ending each day | | | | |
| REPRESENTATIVE #3: | | | | | |
| \$150 | | | | | |
| Phone# | Cell# | | | | |
| E-mail | | | | | |
| ***Please check the functions you will be atte | nding each day | | | | |
| ☐ Friday Breakfast ☐ Friday Breaks | | | | | |
| □ Saturday Breakfast □ Saturday Breaks □ Sunday Breakfast | | | | | |
| | | | | | |
| REPRESENTATIVE #4: \$150 | | | | | |
| Phone# | Cell# | | | | |
| E-mail | | | | | |
| ***Please check the functions you will be attered as Friday Breakfast | ending each day | | | | |

Responsibility Agreement

PLEASE READ THE FOLLOWING STATEMENTS THOROUGHLY AND SIGN BELOW. SPACE CANNOT BE ASSIGNED UNLESS THIS FORM CONTAINS AN AUTHORIZED SIGNATURE.

Exhibitor assumes entire responsibility and hereby agrees to protect, indemnify, and defend the Florida Chapter American College of Physicians, the Grand Hyatt Tampa Bay, Tampa, FL, the affiliates, officers, directors, agents, employees, and partners of each ("Indemnified Parties") harmless against all claims, losses and damages, including negligence, to persons or property, governmental charges or fines and attorney's fees arising out of or caused by Exhibitor's installation, removal, maintenance, occupancy or use of the exhibit premises or a part thereof, except to the degree of negligence or willful misconduct of the Indemnified Parties.

In addition, Exhibitor acknowledges that the Indemnified Parties do not maintain insurance covering Exhibitor's property and that it is the sole responsibility of the Exhibitor to obtain business interruption, property damage and comprehensive general liability insurance.

We/I have read and agree to abide by all requirements, restrictions and obligations set forth in the 2023 Exhibitor Prospectus, the policies governing exhibitors, those on this application and those which may be set forth in the future in connection with the 2023 Annual Scientific Meeting. We/I further acknowledge that Florida Chapter ACP reserves the right to reject, at its discretion, any application to exhibit.

| Company Name | | | | | Date | |
|----------------------|----------|-------|---------|-----|------|--|
| Contact Person | | | | | | |
| Title | | | | | | |
| Authorized Signature | | | | | | |
| Address | | | | | | |
| City | | State | | Zip | | |
| Phone | Fax Cell | | Cell Ph | | | |
| E-Mail | | | | | | |

PLEASE RETURN SIGNED AGREEMENT AND COMPLETED REGISTRATION FORM:

Florida Chapter ACP

Attn: Dawn Moerings 2410 Ormsby Circle West Jacksonville, Florida 32210

Office: (904) 355-0800 ◆ Fax #: (904) 584-9599 ◆ E-mail: DMoerings@floridachapteracp.org

Federal ID # 59-6152179

All sponsorships MUST be sent to the Chapter office at time of submission for College approval.

ROOM RESERVATIONS

Please make your room reservations directly with the Grand Hyatt Tampa Bay – Tampa, Florida
Reservations – (813) 874-1234
Group Rate - \$179.00 (single or double occupancy)
(Room rate cutoff date – October 3, 2023)