General Information
The Society for Academic Continuing Medical Education (SACME) is a volunteer organization currently comprised primarily of Directors, Associate Deans and Deans of CME departments within North American medical schools. We anticipate attendance at this meeting to be approximately 130-150 SACME members and nonmembers.

We view the addition of exhibitors/supporters to this meeting as a benefit to attendees as well as an opportunity for the organization to support education of our members while receiving positive company recognition.

Deadline
Exhibit/support form must be received by May 1, 2017. Exhibit space is limited; applications will be accepted on a ‘first paid, first booked’ basis.

Recognition
Exhibitor/supporter information will be published in the final program for the meeting thanking them for their support at all general sessions of the meeting. Recognition will also be provided on SACME’s website, www.sacme.org.

Exhibit Dates are May 17, 18, & 19. Setup will be the evening of May 16 at 6:00pm. Exhibitors can tear-down after the final break on May 19, around 4:00 pm.

EXHIBIT FEES

Includes the “exhibit package” (does not include attendance at the meeting sessions):

- Table-top  
- 1 representative*  
- Acknowledgement in program materials  
- Meals

$1,000 Non-Profit
Includes the exhibit package

$1,200 For-Profit
Includes the exhibit package

* A second representative may come for an additional $200 (does not include meeting session attendance).
$2,500 Gold Supporter
Includes 1 gratis registration to the meeting and an exhibit table

$5,000 Platinum Supporter
Includes 2 gratis registrations to the meeting and an exhibit table

The 2017 Annual Meeting plan includes an opening night party at the spectacular “Mummy Mountain” that is a western town themed area within the JW Marriott complex. Supporters are being requested for this event at the above levels and will include extra signage for making this special event possible.

EXHIBITOR/SUPPORTER REGISTRATION FORM – OR REGISTER ONLINE AT WWW.SACME.ORG

Contact: First Name________________________________________ Last Name____________________________________

Organization/Company: ____________________________________________________________________________

Address: Street_____________________________________________________________________________________

City_________________________ State/Province________________________ Zip_________ Country______________

Phone: (________)__________ ext._________ E-mail: ______________________________________________________

Please check the applicable fees below:

Exhibit Fees (please see the description on the first page for what fees include):

☐ $1,000 non-profit ☐ $1,200 for-profit

☐ $200 extra representative

Grant Support Levels (please see the description above for what each grant level includes):

☐ $2,500 Gold Support ☐ $5,000 Platinum Support; will you exhibit? ☐ Yes ☐ No

Payment Method:

☐ Check payable to: Society for Academic CME (or SACME)

☐ Credit card: _____ MasterCard _____ VISA _____ American Express

Cardholder’s Name______________________________________________

Card Number__________________________________________________ Expiration Date__________________________

Description of Your Organization (for program):

____________________________________________________________________________________________________________________________________________________________________

Please Return the Registration Form and Payment to:

SACME
3416 Primm Lane
Birmingham, AL 35216
info@sacme.org
Phone: 205-978-7990
Fax: 205-823-2760

SACME reserves the right to select which companies are eligible for support/exhibit opportunities. A full refund will be provided should support not be accepted from your company.