Print Form

Industry Education Workshop Application

Take advantage of the new exhibitor sponsored Industry Education Workshops! Located in the Exhibit Hall, Industry Education Workshops offer exhibitors an excellent opportunity to present sessions on the exhibit floor, providing increased learning opportunities for attendees and an opportunity for exhibitors to present products and services beyond their booth space. Gain additional face-to-face contact with potential buyers through this unique forum.

These commercial workshops are conducted by exhibitors in specially constructed theaters on the exhibit floor. A limited number of 60-minute sessions will be presented each day. These workshops are listed in the exhibit section of the Program and Exhibition Guide and are highlighted on signage at the company's booth.

APPLICATION INSTRUCTIONS

Workshop fees are $6,000 for lunch time sessions and $4,000 for break time sessions. Application and payment must be received no later than October 19, 2011. The theater is carpeted and set theater-style to accommodate approximately 75 attendees. A head table, screen, LCD projector and a sound system with a lavaliere microphone are included in the fee. Costs for additional requirements are the responsibility of the exhibitor, and an order form for additional equipment will be sent with your confirmation. **The sponsoring company is responsible for costs associated with speakers and additional requirements. Signage announcing the workshops will be located throughout the exhibit hall. Additional promotion (i.e. pre-conference mailer, door drop, etc.) of the Industry Education Workshop is strongly recommended and is the sole responsibility of the sponsor. Each industry education workshop will be promoted via an audio announcement in the Exhibit Hall approximately five minutes prior to its start time.**

Content requires advanced approval by SCCM for each session. These sessions do not provide continuing education credit. Workshop content must be interactive, intellectually stimulating and scientifically current.

☐ Yes, we would like to sponsor a Industry Education Workshop.

Topic Title:_____

Presenter(s):_____

**If more than one topic, please attach a complete schedule of topics and presenters.*

Please attach a 50-word or less description of the topic and format for review and approval. Session dates and times are as follows.

Sunday, February 5, 2012 *	**Monday, February 6, 2012 ***	**Tuesday, February 7, 2012 ***
☐ 9:30 a.m. - 10:30 a.m.	☐ 9:00 a.m. - 10:00 a.m.	☐ 9:00 a.m. - 10:00 a.m.
☐ 12:45 p.m. - 1:45 p.m.	☐ 12:15 p.m. - 1:15 p.m.	☐ 12:15 p.m. - 1:15 p.m.
☐ 2:45 p.m. - 3:45 p.m.	☐ 2:15 p.m. - 3:15 p.m.	☐ 2:15 p.m. - 3:15 p.m.

*Times are subject to change to occur during session breaks

Company Name:_____

Contact Name:_____ Title:_____

Address:_____

City:_____ State:_____ Zip/Postal Code:_____

Country:_____

Telephone:_____

Email:_____

Signature_____ Date_____

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Return this form along with the payment no later than October 19, 2011 to:
Society of Critical Care Medicine
35083 Eagle Way, Chicago, IL 60678-1350 USA
Phone: +1 847 827-7478
Fax: +1 847 493-6478

Payment:

☐ Check (U.S. funds drawn on a U.S. bank.) or International Money Order, made payable to SCCM

Check Number:_____

Credit Card Information: ☐ Visa ☐ American Express ☐ MasterCard ☐ Discover

Card Number:_____ Expiration Date:_____

Name on the Card:_____

Signature of the Cardholder:_____