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## 6<sup>TH</sup> ANNUAL MEETING

January 17 - 19, 2019  
JW Marriott Buckhead  
Atlanta, Georgia

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### ABOUT PRiSM

*The purpose of PRiSM is to foster and stimulate interdisciplinary professional education, research and interest in pediatric and adolescent sports medicine and, in this regard, to promote and participate in high-quality research and the advancement of understanding in the field of pediatric and adolescent sports medicine.*

The membership of PRiSM consists of Doctoral Fellows, Associate Members and Student Members. This organization includes various medical disciplines and is not limited to surgeons, pediatricians, physiatrists, physical and occupational therapists, orthotists, prosthetists, rehabilitation engineers, kinesiologists, nurse practitioners, special educators, researchers and certified athletic trainers and coaches.

**Incorporated in 2013**

**Members: 220**

**Projected Annual Meeting Attendance: 325**

The **PRiSM Annual Meeting** is designed to provide high-quality dissemination of information in the basic sciences, prevention, diagnosis, treatment, and technical advances in the multi-disciplinary areas of sports medicine for children and adolescents. The Scientific Program Committee works diligently to provide a diverse, innovative and well-rounded program while incorporating feedback from last year's meeting. As a result, we offer you 2 ½ days filled with learning opportunities, engaging top experts along with collaboration opportunities.

## 2019 PRiSM 6<sup>th</sup> ANNUAL MEETING EDUCATIONAL GRANT & MARKETING OPPORTUNITIES

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### EDUCATIONAL GRANT OPPORTUNITIES

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***NOTE: Educational grant support to be provided as unrestricted.***

#### Tier 1 Educational Grant Support: \$30,000

- 1) Inclusion in the PRiSM Annual Meeting email blasts
- 2) Link and logo displayed on the PRiSM website (10 months)
- 3) Recognition:
  - a. In the PRiSM eNewsletter
  - b. On the PRiSM Annual Meeting webpage
  - c. In Exhibit area
  - d. On signage throughout the meeting
  - e. In the Annual Meeting Final Program
  - f. In all Annual Meeting printed publications
- 4) Thank-you email acknowledging support sent to PRiSM Annual Meeting attendees (pre-meeting)
- 5) Thank You Email sent to all PRiSM Members, Annual Meeting attendees and Industry (post-meeting)



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### Tier 2 Educational Grant Support: \$20,000

- 1) Recognition:
  - a. In the PRiSM eNewsletter
  - b. On the PRiSM Annual Meeting webpages
  - c. In Exhibit area
  - d. On signage throughout the meeting
  - e. In the Annual Meeting Final Program
  - f. In all Annual Meeting printed publications
- 2) Thank-you email acknowledging support sent to PRiSM Annual Meeting attendees (pre-meeting)
- 3) Thank You Email sent to all PRiSM Members, Annual Meeting attendees and Industry (post-meeting)

### Tier 3 Educational Grant Support: \$10,000

- 1) Recognition:
  - a. In Exhibit area
  - b. On signage throughout the meeting
  - c. In the Annual Meeting Final Program
  - d. In all Annual Meeting printed publications
- 2) Thank You Email sent to all PRiSM Members, Annual Meeting attendees and Industry (post-meeting)

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## SPECIFIC MARKETING OPPORTUNITIES

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### **Industry Session (4 time slots): non-CME event**

An industry sponsored lunch session offers a tremendous opportunity to provide education, demonstrate your company's commitment to quality patient care, and build your corporate brand. Each session is open to all meeting attendees. The sessions are not part of the PRiSM Annual accredited program and CME/CEUs are not available through PRiSM.

Your company will have a dedicated time slot. PRiSM will help market your event and provide you with a mailing list in advance of your sponsored session.

***Note: Company is responsible for any speaker fees, audio/visual, staffing, and food and beverage costs. All marketing materials are required to be approved by the PRiSM Board of Directors.***

#### Benefits:

- Session listed online
- Session listed in Final Program
- Company name and logo on signage during the session
- Three additional company representative badges

#### TIME SLOTS

**Friday, January 18<sup>th</sup>:** 12:30 – 1:30 pm (\$10,000)

**Saturday, January 19<sup>th</sup>:** 12:30 – 1:30 pm (\$10,000)

Session titles are due December 31, 2018, to be included in the Final Program.



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### ADDITIONAL MARKETING OPPORTUNITIES

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**Registration Packet Insert.....\$1,000**

Your one page insert is distributed to all attendees in the PRiSM Annual Meeting registration materials and 400 inserts must be delivered to the PRiSM office for inclusion. Limit of ten (10) available.

**Name Badge Holders or Lanyards.....\$2,000**

Name badge holders, featuring your organization's logo will be available for attendees upon arrival at the meeting.

**Floor Clings/GOBOs (if applicable).....\$2,000**

Direct attendees to your booth with custom floor graphics available in the meeting foyer near the exhibit area of the hotel. The organization is responsible for supplying artwork and associated production costs. Production costs are \$12.75 per square foot. Placement dependent on space available.

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### 2019 PRiSM 6<sup>TH</sup> ANNUAL MEETING EXHIBITOR INFORMATION

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#### EXHIBIT HOURS

Exhibit Set-Up: Thursday, Jan 17: 12:00 pm-7:00 pm

Power strips will be available for all exhibitors. All exhibits must be set-up by 7:00 am on Friday.

Exhibit Display: Friday, Jan 18

7:00 am – 8:00 am	Breakfast
10:15 am-10:30 am	Morning Break
12:00 pm – 1:45 pm	Lunch
3:15 pm – 3:45 pm	Afternoon Break
5:15 pm – 6:15 pm	Reception

Exhibit Display: Saturday, Jan 19

7:00 am – 8:00 am	Breakfast
10:15 am-10:30 am	Morning Break
12:00 pm – 1:45 pm	Lunch
3:15 pm – 3:45 pm	Afternoon Break

Exhibit Tear-Down: Saturday, Jan 19: 4pm -8pm

NOTE: We request you open your displays on time each day and staff them throughout the posted exhibit hours. The tabletop displays are designed to have two staff members at each display table. There is an additional charge for extra exhibit staff.



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### LOCATION

JW Marriott Buckhead  
ATTN: PRISM Annual Meeting  
3300 Lenox Road NE  
Atlanta, GA 30326

Phone: 404-262-3344

### TABLE TOP DISPLAY SPECIFICATIONS

**Size:** 6 ft. draped table  
**Drape Colors:** White  
**Carpet:** Multicolor pattern  
**Display fee:** \$1,500

### Display Location

Specific display locations will be assigned, first-come, first-served. Company names will be placed on sign at each table. Locate your company table prior to set-up.

### Shipping

Package shipments should be arranged through the hotel Shipping & Receiving Department, noted above.  
*All packages should be labeled with your company name, your name and PRISM Annual Meeting*

### POLICIES, PROCEDURES AND INFORMATION

#### FDA Regulations

Exhibitors must abide by all applicable Food and Drug Administration (FDA) regulations, including any or all approved requirements. Any product that is an investigational device or drug must be clearly marked as such. All products and services exhibited shall comply with FDA policy and procedures (particularly with respect to the marketing and labeling of investigational or unapproved drugs and devices) and other applicable policy and procedures. Exhibitors are reminded that the FDA prohibits the advertising or other promotion of investigational or unapproved drugs and devices. The FDA also prohibits the promotion of approved drugs or devices for unapproved uses. In addition, under FDA rules, the background of the exhibit must show the generic name of any drug product featured. Additional information may be obtained from the FDA website at [www.fda.gov](http://www.fda.gov).

#### Cancellations and Refunds

*Written notification of a cancellation must be received by PRISM by December 31<sup>st</sup> to be eligible for a refund. A \$750 administrative fee will be assessed for each booth cancellation.*

Space not claimed by 7:30 AM, Friday, January 25<sup>th</sup> may be resold or reassigned by PRISM without obligation to refund exhibit fees or to assign the exhibitor to another space, unless special arrangements have been made with the CME Office in advance.

PRISM reserves the right to rearrange the floor plan at any time and to relocate exhibitors if it becomes necessary for causes beyond the control of PRISM or is advisable in the best interest of PRISM.



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### Exhibitor Identification

Exhibitor identification in all PRiSM publications and on all signs and booth graphics, related to this specific meeting, must be the one company name submitted on the Exhibitor Registration Form.

### Storage of Cases, Boxes, Etc.

PRiSM has reserved a room for storage of crates, boxes, etc. Contact the registration desk on-site for information. **Shipping cases should not be stored within view of the attendees.**

### Commercial Press

Reporters must have prior approval from PRiSM. Contact the office at (414) 918-9876.

### Registration/Badge Policy

All company representatives **must be pre-registered by January 11, 2019**. The Exhibitor Registration Form should be returned to PRiSM and should include the list of representatives attending the booth. After this date, any additions or changes will be completed on site. PRiSM badges must be worn and visible at all times to all symposium functions. Business cards are not to be inserted over the official PRiSM badge.

### Reps Attending Sessions

Exhibitors who are pre-registered as such are eligible to attend the educational sessions as long as another attendee is present at that booth during that time. Representatives who wish to attend the educational sessions and who are not representatives of the booth may must register and pay the full membership rate of \$350. Late and cancellation policies will apply.

### Security

The exhibit area is located in the hotel corridor. PRiSM has reserved a storage area for overnight storage of items of value (e.g., display equipment, instruments, etc.). Exhibitors will be able to leave their displays up overnight, but we recommend that any items of great value be secured by you (computers, cell phones, etc.). Neither the hotel security staff nor PRiSM will be responsible for loss of or damage to any property. Exhibitors are responsible for safe-guarding their goods, materials, equipment and exhibits at all times.

### Hotel's Hold Harmless Clause

The exhibitor assumes the entire responsibility and liability for losses, damages, and claims arising out of exhibitor's activities on the Hotel premises and will indemnify, defend, and hold harmless the Hotel, its owner, and its management company, as well as their respective agents, servants, and employees from any and all such losses, damages, and claims.

PRiSM will not be responsible or liable for any loss, damage, or claims arising directly from the Hotel's own negligence. PRiSM will be responsible to negotiate the contract with its exhibitors.

### Marketing and acknowledgements

Company logos may be used on promotional items as well as signage. However, product names and/or logos are against the policy of the Accreditation Council for Continuing Medical Education (ACCME). Your exhibiting participation will be noted in text vs logo representations.



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**2019 PRISM EXHIBITOR REGISTRATION**

Exhibitor Name: \_\_\_\_\_

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

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

City, State, Zip: \_\_\_\_\_

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

**Exhibit Table Top Display - \$1,500 (includes 2 representatives):**

Application and payment received by December 31, 2018:

- Breakfast and lunches are provided for up to two (2) representatives attending
- Additional \$100 per representative attending above the two initial.

Total exhibit fee: \$\_\_\_\_\_

Will you be attending the event? Yes\_\_\_\_ or No\_\_\_\_  
 Will you be displaying or marketing your products at the event? Yes\_\_\_\_ or No\_\_\_\_

*(Note that if you intend to display and/or market your products to event attendees, you are not eligible for a charitable deduction for your contribution.)*

Will there be additional representatives, besides you, attending? Yes\_\_\_\_ or No\_\_\_\_

If yes, list

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
 First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
 First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Make check payable and send to:  
 PRISM  
 555 East Wells St, Suite 1100  
 Milwaukee, WI 53202

Charge the full fee to (circle one):      ♦ American Express      ♦ Discover      ♦ MasterCard      ♦ Visa

Card # \_\_\_\_\_ Exp Date: \_\_\_\_\_

Name on Card: \_\_\_\_\_

Signature: \_\_\_\_\_



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2019 PRISM GRANT SUPPORT/ MARKETING AGREEMENT

Organization Name: \_\_\_\_\_

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

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

City, State, Zip: \_\_\_\_\_

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

- TIER 1 EDUCATIONAL GRANT SUPPORT: \$30,000
TIER 2 EDUCATIONAL GRANT SUPPORT: \$20,000
TIER 3 EDUCATIONAL GRANT SUPPORT: \$10,000
PT/ATC PRE-COURSE EDUCATIONAL GRANT SUPPORT: \$2,000
INDUSTRY SESSION: \$10,000
REGISTRATION PACKET INSERT: \$1,000
NAME BADGE HOLDERS: \$2,000
FLOOR CLINGS: \$2,000

TOTAL DUE..... \$ \_\_\_\_\_

AUTHORIZATION: I agree to the terms and conditions above. This Agreement must be signed in order to confirm sponsorship.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Mail check payable to: PRISM, 555 East Wells St., Suite 1100, Milwaukee, WI 53202

Or charge to: American Express Discover MasterCard Visa

Card # \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Name on Card: \_\_\_\_\_

CANCELLATION POLICY: No refunds due to grant support cancellation will be granted. Sponsor will be obligated to pay any outstanding balance due.