



## CALIFORNIA SOCIETY OF PHYSICAL MEDICINE AND REHABILITATION

office: 8175 Arville St. #199 • Las Vegas, NV 89139-7111  
phone/FAX: (702) 365-0912 • email: [CSPMR@cox.net](mailto:CSPMR@cox.net) • website: [www.cspmr.net](http://www.cspmr.net)

Dear Exhibitor,

On behalf of the Officers and Directors of the California Society of Physical Medicine & Rehabilitation, I would like to invite you to participate in our Annual Meeting as an exhibitor and to help provide support for the overall meeting.

1. TITLE: ANNUAL MEETING
2. DATE: APRIL 21 – 23, 2017
3. PLACE: SAN FRANCISCO AIRPORT MARRIOTT WATERFRONT HOTEL  
BURLINGAME, CALIFORNIA
4. AUDIENCE: 75-80 Physical Medicine & Rehabilitation Physician Specialists

There are three categories of sponsorship:

Platinum	\$2,500.00	Sponsor is entitled to one exhibit space, ad listed within flash drive containing syllabus materials, one ad printed in newsletter.
Gold	\$1,500.00	Sponsor is entitled to one exhibit space, and one ad printed in newsletter.
Silver	\$1,000.00	Sponsor is entitled to one exhibit space.

This amount will help us pay speaker honoraria, food and publicity expenses. We guarantee the money will be spent for this conference and any published advertisements according to the category of sponsorship. Also in return, all sponsors will receive:

1. Two representatives in attendance at the Annual Meeting
2. Attendance to President's Welcoming Luncheon where reps will be introduced

Our meeting set up encourages attendees to visit with exhibits. Morning and afternoon breaks, as well as both continental breakfasts on Saturday and Sunday mornings, will be held in the exhibit area. In order for attendees to have any refreshments they have to enter the exhibit area.

Please complete the **Letter of Agreement** enclosed. Space is limited so don't delay in your response. We accept credit card payment via PayPal or a check. Our tax I.D. # is 68-0281643.

If paying by credit card go to our website:

[www.cspmr.net](http://www.cspmr.net) > Meetings > Annual Meeting > Exhibit / Sponsor Information

If paying by check it should be made out to CSPM&R. Mail the Letter of Agreement and the payment form to:

Andi Irons, Executive Director  
California Society of Physical Medicine & Rehabilitation  
8175 Arville Street, #199  
Las Vegas, NV 89139-7111

You should not make any arrangements with any speakers as to content, titles, direct payments, etc. If you have any questions regarding the above information, please contact Andi Irons, Executive Director, by email at [CSPMR@cox.net](mailto:CSPMR@cox.net), office phone (702) 365-0912, or cell (702) 497-7505.

Sincerely,



Jeffrey Young, M.D.  
Chairman  
Medical Education Committee

Enclosures: Letter of Agreement, Standards for Commercial Support, Vendor Information,  
Vendor Rep Form, 2017 Annual Meeting Brochure

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## Payment Form

California Society of Physical Medicine & Rehabilitation  
Annual Meeting  
April 21 – 23, 2017

San Francisco Airport Marriott Waterfront Hotel, Burlingame, California

Payment method:     Check enclosed             PayPal

Amount: \$ \_\_\_\_\_