

Course ID: A11803**2024 UCLA Musculoskeletal Ultrasound Course****Date: February 17 – 18, 2024****Location: UCLA Santa Monica Medical Center - 1250 16th St, Santa Monica, CA 90404****Course Chair: Dr. Benjamin Levine****EXHIBITOR DETAILS**

COMPANY (TO APPEAR IN ACTIVITY MATERIAL)

CONTACT PERSON

EMAIL

PHONE

ADDRESS

CITY

STATE

ZIP CODE

REPRESENTATIVE #1 NAME

EMAIL

REPRESENTATIVE #2 NAME

EMAIL

ELECTRICAL OUTLET NEEDED (YES/NO) – PLEASE BRING YOUR OWN EXTENSION CORDS

EXHIBITOR FEES

The company listed above wishes to participate as an exhibitor for the above-named activity. The exhibitor fees are provided in the amount of \$2,500 per exhibit for (2) days.

PAYMENT METHODS**Online (preferred):**

We accept Visa, MasterCard, American Express, and Discover credit cards.

To register using a credit card or ACH(e-check)/electronic transfer, please [Click Here.](#)

**Credit card payments via phone, fax, or mail are no longer accepted.*

CONDITIONS

The David Geffen School of Medicine at UCLA, agrees to:

- provide exhibit space to the above-listed exhibitor for the course presented on the date(s) and location(s) designated above
- abide by the ACCME Standards for Integrity and Independence in Accredited Continuing Education
- acknowledge exhibitors via signage or other means
- provide a 6ft table and 2 chairs

The exhibitor acknowledges that product-promotion material or product-specific advertisement of any type is prohibited in or during the accredited activity and that live or enduring promotional activities must be kept separate from the CME activity.

The exhibitor agrees to:

- abide by the ACCME Standards for Integrity and Independence in Accredited Continuing Education, the AMA Gifts to Physicians policy, and the UC Healthcare Vendor Relation Policy, which bans all gifts
- not engage in any promotional activity at the program other than in the area designated by the Office of Continuing Medical Education as “exhibit space”
- display only during those times and spaces specified by the Office of Continuing Medical Education and maintain separation from the educational activity
- limit the number of representatives managing the exhibit to two (2)
- wear program-issued name tags at all times
- comply with COVID policies, inclusive of masking requirements
- bring the appropriate power cords, if power is needed
- remit payment before the activity

REFUND POLICY

Exhibitor fees are **NON-REFUNDABLE** unless the Exhibit is canceled by UCLA.

CONTACT US

For questions or concerns, please contact Je'Rel Smith at ccpdseg@mednet.ucla.edu

SIGNATURES

The company and the Office of Continuing Medical Education, David Geffen School of Medicine at UCLA provider representative must sign below.

Company Representative:

**Center for Continuing Professional Development
David Geffen School of Medicine at UCLA:**

SIGNATURE

SIGNATURE

NAME

NAME

TITLE

TITLE

DATE

DATE

Please email the completed, signed exhibit LOA to
CCPDSEG@mednet.ucla.edu