

**Course ID: C14002****49th Annual UCLA State-of-the-Art Urology Conference****Date:** Friday, March 1, 2024, 6:30 AM - Sunday, March 3, 2024, 5:30 PM**Location:** UCLA Meyer & Renee Luskin Conference Center, Los Angeles, CA**Course Chair:** William Aronson, MD**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 \$5,000 per exhibit.

**PAYMENT METHODS****Online (preferred):**

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

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

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

**CONDITIONS**

The Center for Continuing Professional Development, 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 Center for Continuing Professional Development as "exhibit space"
- display only during those times and spaces specified by The Center for Continuing Professional Development 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](mailto:ccpdseg@mednet.ucla.edu)

## SIGNATURES

The company and The Center for Continuing Professional Development, David Geffen School of Medicine at UCLA provider representative must sign below.

**Company Representative:**

**The Center for Continuing Professional  
DevelopmentDavid Geffen School of  
Medicine at UCLA:**

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SIGNATURE

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SIGNATURE

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NAME

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NAME

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TITLE

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TITLE

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DATE

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DATE

**Please email the completed, signed exhibit LOA to**  
**[CCPDSEG@mednet.ucla.edu](mailto:CCPDSEG@mednet.ucla.edu)**