Vendor Prospectus

37th Annual Symposium & Exhibition
Sponsored by the Maryland/DC Society for Respiratory Care

Carousel Hotel
Ocean City, Maryland
September 13, 14, 15
General Information

The 37th annual Conference by the Sea will be held at the Carousel Hotel in Ocean City, MD. The Conference by the Sea is the premier educational symposium on the east coast and boasts over 400 participants and over 40 vendors. This year will feature an exciting array of speakers and current topics. The conference is attended by managers, practitioners and prospective graduates.

All CRCE certificates will be generated by participants entering credits online at: www.mddc.enteryourcredits.com PARTICIPANTS MUST ENTER THEIR CREDITS ONLINE. NO PAPER FORMS WILL BE USED.

Accommodations:

Hotel accommodations will be at the Carousel Hotel. A block of rooms is reserved in the name of the AARC-MD/DC Society Conference by the Sea. These rooms will be held until August 17, 2017.

Carousel Hotel, Ocean City, Maryland
1-800-641-0011
Check-in time is 4:00 p.m.
Check-out time is 11:00 a.m.
Carousel Hotel Rates
Deluxe Standard: $104 per night
Oceanfront: $130 per night
Two bedroom Oceanfront Condo: $256 per night
Three bedroom Oceanfront Condo: $294 per night

Conference Registration Rates:

The following lists the tuition rates and categories for participant registration. Pre-Register by mail or fax by September 5, 2017.

**Full Conference Rates:**
AARC Member or AAST Member..............................................................$269
AARC Student Member.................................................................$79
All Non-AARC or AAST Members .......................................................$309
Student Non-Member .............................................................................$89
Spouse of Registered Attendee (NO CEU's)..............................................$89
## Conference by the Sea 2017

### Program

#### Wednesday, September 13th, 2017

<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>8:00 am - 5:00 pm</td>
<td>Symposium Lectures</td>
</tr>
<tr>
<td>12:00 pm - 5:00 pm</td>
<td>Vendor Registration &amp; Set up</td>
</tr>
<tr>
<td>5:00 pm - 6:30 pm</td>
<td>Wine &amp; Cheese Reception</td>
</tr>
<tr>
<td>8:00 pm - 10:30 pm</td>
<td>Casino Night Welcome Party</td>
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#### Thursday, September 14th, 2017

<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>8:00 am - 9:00 am</td>
<td>Continental Breakfast</td>
</tr>
<tr>
<td>9:00 am - 4:00 pm</td>
<td>Exhibits Open</td>
</tr>
<tr>
<td>9:00 am - 11:00 am</td>
<td>Symposium Lectures</td>
</tr>
<tr>
<td>11:00 am - 12:00 pm</td>
<td>Exclusive Vendor Time</td>
</tr>
<tr>
<td>12:00 pm - 1:00 pm</td>
<td>Lunch</td>
</tr>
<tr>
<td>1:00 pm - 5:00 pm</td>
<td>Symposium Lectures</td>
</tr>
<tr>
<td>5:00 pm - 7:00 pm</td>
<td>Beach Activities/Social</td>
</tr>
<tr>
<td>7:00 pm - 10:00 pm</td>
<td>Sputum Bowl Competition</td>
</tr>
</tbody>
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#### Friday, September 15th, 2017

<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>8:00 am - 9:00 am</td>
<td>Continental Breakfast</td>
</tr>
<tr>
<td>9:00 am - 12:00 pm</td>
<td>Symposium Lectures</td>
</tr>
</tbody>
</table>

💡 Prizes Awarded for Top 3 Vendor Booths!

💡 Casino Night on the Patio - Welcome Party!
Exhibitor Sponsorship

Booth sponsorship is set at one price for all exhibitors starting in 2017. All exhibitors can place brochure material in the participant conference bags. Brochure material must be mailed or delivered to the Carousel hotel 3 days in advance of the conference. The booth rate includes one electrical outlet per booth. You must request the need for an electrical outlet on the application form (last page).

**Exhibitor Sponsorship ($750)**
- 8x8 booth with draping, 2 chairs
  back/side curtain.
- 2 Exhibitor Badges, includes lunch, social activities and all lectures.
- Company Sign at Booth.
- Literature drop in conference bags.
- Exhibitors are eligible to earn CRCE’s for the talks they have attended and evaluated.

Optional Sponsorships:

* Lunch Sponsor $500  [Announcements /Vendor Signs at Lunch /Literature Distribution at lunch]*
* Casino Night Sponsor $500  [Announcements /Vendor Signs at Luau /Literature Distribution]*

Exhibitor Regulations

1. **MANAGEMENT**- The MDDC Society for Respiratory Care is herein referred to as the management.

2. **APPLICATION**- A fee must accompany the application form. Cancellation prior to July 20th, 2017 a $100 fee will be deducted from original payment. Registrations received after September 5th, 2017 add $100 late fee.

3. **ARRANGEMENTS**- The booth price includes one draped table, 2 chairs and back/side curtain. Any other items need to be ordered from display company or hotel.

4. **EXHIBIT HALL HOURS**- Wednesday, September 13th, 5 pm -6:30 pm and Thursday September 14th, 9 am -4 pm.

5. **ASSIGNMENT**- No exhibitor shall assign, sublet or share any space without the permission of the management. Management reserves the right to remove an exhibitor in violation of this rule and exhibitor forfeits total amount of booth payment.

6. **LIABILITY**- Exhibitor assumes full responsibility for safety of their exhibit. Exhibitors are responsible for the security of their exhibit.

7. **RESTRICTIONS**- Management may at its sole decision determine that an exhibitor is objectionable and ask the exhibitor to vacate the premises and forfeit all fees.

8. **REGISTRATION**- Two additional exhibitors from the same company may register to be at the booth for an additional fee of $30 each.

9. **LECTURES**- All registered exhibitors with badges will be admitted to the general lectures without additional costs. Exhibitors who attend talks are eligible to earn CRCE’s.

10. **AGREEMENT**- The submission of an application with fees constitutes an agreement between exhibitor and management. Exhibitor agrees to abide by all the rules and regulations herein.
Conference Committee

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bettye.j.carnathan@medstar.net
Exhibitor Application:

Register & Pay online at: www.mddcstore.net
additional conference information: www.conferencebythesea.net

1. Exhibitor Booth Registration Application:

Company Name__________________________________________________________

Contact Person___________________________________________________________Contact Phone #___________________________

Address________________________________________________________________________________City__________________________

State Zip email:____________________________________________________________

2. Do you need electrical power? ☐ YES ☐ NO
One electrical socket will be provided for your booth upon request as part of the vendor exhibitor booth fee. All power for exhibitor booths is 110 volts, single phase. Please provide your own extension cords if possible. If you need additional outlets or extension cords ($30 per outlet) ($10 per extension cord) please check below: (Please add these total amounts to your booth amount at bottom of application)

Additional Outlets Needed? ☐ YES How Many__________________________ x $30 = _______________

Extension Cords Needed? ☐ YES How Many__________________________ x $10 = _______________

3. Exhibitor Selection: ☐ Exhibitor Booth $750

4. Optional Sponsorships: ☐ Casino Night Sponsor $500 ☐ Lunch Sponsor $500

5. Booth Event Sponsorship Sign: (30 Characters Max) (Company Name)

6. Exhibitor Name Badges: (2 badges are included) additional badges purchased on site.

Name__________________________________________________________ Name__________________________________________________

Number of Booths Paid for: ☐1 ☐2 other_____________________

First Choice Booth # Location_________________________ Second Choice Booth Location_______________________

8. Payment Information: (Make Checks Payable to: MDDC Society for Respiratory Care)

Payment Type: ☐ Check ☐ Visa ☐ Mastercard ☐ American Express ☐ Discover

Card number__________________________________________________________ Exp Date________________

Name on card_________________________________________________________ Date________________

Authorized Signature_______________________________________________ Total Amount Charged $____________

Mail or fax completed form and payment to:
Becca Gordon
Conference by the Sea 2017
16210 McMullen Hwy, SW
Cumberland, MD 21502
Fax 301-729-4772

For invoicing information, please email: becca@reginahamm.com