MAYO CLINIC

Lisa A. Winter, PMP, M.A.
Plummer 2-60
200 First Street Southwest
Rochester, Minnesota 55905

Mayo School of Continuous Professional Development

On behalf of course directors J. Michael Bostwick, M.D., John M. Knudsen, M.D., and Mayo Clinic School of Continuous Professional, we are pleased to announce our upcoming CME activity "Mildred L. and Garnet L. Findling Named Visiting Professorship: Educating Medical Providers About the Clinical Care of Transgender and Intersex People" that will be held January 17, 2014 at the Mayo Clinic in Rochester, MN.

This one-day course is designed as a continuing education activity to identify and discuss current health disparities within the transgender and intersex community. This educational activity is being offered to advance the understanding of transgender and intersex people and their health care needs. The goal is to promote awareness and provide clinical education to assist the provider and their health care team to partner with transgender and intersex people to achieve optimal health. We believe this conference has the potential to significantly enhance the quality of healthcare in the United States. For more detailed information, please refer to the course website at http://www.mayo.edu/cme/internal-medicine-and-subspecialties-2014R539. Your support of this effort would be most appreciated.

We would like to invite you to participate in this important event, and would welcome your financial support for the meeting. The opportunity for health care providers to meet with various representatives to discuss products and services is often limited. As a colleague and key representative in an ever-changing health care industry, we invite you to participate in our program to share information with our attendees. We expect between 80 and 100 attendees for this year's course. ***The fee to display at this course is $1,000.***

If you are interested in exhibiting at this course please complete the enclosed exhibit letter of agreement and exhibit registration form, include payment (made payable to Mayo Clinic, Federal Tax Identification #41-6011702) and email pederson.jenna@mayo.edu, fax to 507-538-7234 or send to Jenna Pederson, Mayo School of Continuous Professional Development, Plummer Building 2-60, 200 First St SW, Rochester, MN 55905.

We hope you will be able to join us in Rochester in January! If you have any questions, please do not hesitate to contact us.

Sincerely,

Lisa A. Winter
Lisa A. Winter
CME Specialist
Mayo Clinic

J. Michael Bostwick, M.D.
Course Director

John M. Knudsen, M.D.
Course Director

MAYO CLINIC

Mayo School of Continuous Professional Development
Mildred L. and Garnet L. Findling Named Visiting Professorship: Educating Medical Providers About the Clinical Care of Transgender and Intersex People
Rochester, MN
January 17, 2014
Exhibitor Registration Form

(Please print/type information exactly as you want it to appear on the nametag)

Company Name: _____

Primary Exhibitor Representative Name: _____

Mailing Address: _____

City/State/Zip Code: _____

Telephone Number: _____

Fax Number: _____

E-mail address: _____

Secondary Exhibitor Representative Name: _____

Mailing Address: _____

City/State/Zip Code: _____

Telephone Number: _____

Fax Number: _____

E-mail address: _____

Display Information:

- One 8 foot, skirted/draped table will be provided for your exhibit *(a maximum of two representatives are allowed per exhibit).*
- Please list additional requests here: _____

_____

_____

Complete and return this form along with your payment
(payable to Mayo Clinic Federal ID# 41-6011702) to:

Jenna Pederson
Mayo School of CPD
Plummer 2-60
200 First Street SW
Rochester, MN 55905
Telephone: 507-266-0431 FAX: 507-538-7234
E-mail: pederson.jenna@mayo.edu

Mayo School of Continuous Professional Development

Exhibitor Agreement

Regarding the Terms and Conditions for a Commercial Exhibit

Activity Title: **Mildred L. and Garnet L. Findling Named Visiting Professorship: Educating Medical Providers About the Clinical Care of Transgender and Intersex People**
Location: **Rochester, MN** Date(s): **January 17, 2014**

Agreement between: ACCREDITED PROVIDER (PROVIDER):
Mayo School of Continuous Professional Development
AND
Commercial Company (EXHIBITOR): _____
Address: _____
Telephone _____ Fax _____ Email _____

The named EXHIBITOR wishes to exhibit at the above named activity for the amount of **$1,000.00 (USD)**

TERMS AND CONDITIONS

- EXHIBITOR agrees to abide by ACCME Standards for Commercial Support as stated at www.accme.org:
  SCS 4.2: "Product-promotion material or product-specific advertisement of any type is prohibited in or during CME activities. The juxtaposition of editorial and advertising material on the same products or subjects must be avoided. Live (staffed exhibits, presentations) or enduring (printed or electronic advertisements) promotional activities must be kept separate from CME." "Live, face-to-face CME, advertisements and promotional materials cannot be displayed or distributed in the educational space immediately before, during or after a CME activity. **Providers cannot allow representatives of Commercial Interests to engage in sales or promotional activities while in the space or in the place of the CME activity."**
- EXHIBITOR may distribute promotional materials at their exhibit space only. Distribution of pharmaceuticals or other samples is prohibited.
- All commercial support associated with this activity will be given with the full knowledge of the PROVIDER. No additional payments, goods, services or events will be provided to the course director(s), planning committee members, faculty, joint sponsor, or any other party involved with the activity.
- Completion of this agreement represents a commitment and payment is due and collectible by the ACTIVITY DATE unless otherwise agreed upon by the PROVIDER. PROVIDER reserves the right to refuse exhibit space to EXHIBITOR in the event of nonpayment or Code of Conduct violation.
- PROVIDER agrees to provide exhibit space and may acknowledge EXHIBITOR in activity announcements. PROVIDER reserves the right to assign exhibit space or relocate exhibits at its discretion.
- PROVIDER **Federal Tax ID number is 41-6011702**.
  Please remit check payable to: Mayo Clinic- Mayo School of CPD. Please identify name of course on the check stub.

AGREED

EXHIBITOR Representative: _____ _____
(Name) (Signature)

PROVIDER Representative: _____ _____
(Signature)

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Rochester, MN 55905
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