

PrimeFare East Regional Scientific Symposium 2024

June 28th & 29th, 2024

Sheraton Grand Hotel

Nashville, Tennessee

Exhibitor Registration

- Your registration allows for 2 persons per table. This includes all breakfasts, breaks, lunches and attendance at the scientific presentation sessions.

Company Name: (As it should appear on signage) _____

Contact Name: _____ Contact E-mail: _____

Address: _____ City: _____

State: _____ Zip Code: _____ Phone #: _____ Date: _____

Please check all that apply:

Early Bird rate is \$1175 and ends on Friday, May 10th. Payment must be received by the 10th.
Afterwards it is \$1295.

- _____ Tabletop Exhibit – **Early Bird** \$1175 \$ _____
- _____ Tabletop Exhibit - **After May 10th** \$1295 \$ _____
- _____ Additional Tabletop \$600 \$ _____
- _____ Additional On-Site Representative \$195 \$ _____
- _____ Electrical Outlet Needed \$95 \$ _____

Sponsorships Available:

Please see the “Sponsorship Proposal” at www.primecareop.com for more information.

- _____ 2 Day Track Sponsorship \$4500 \$ _____
______{Prosthetics} ______{Orthotics} ______{Pedorthics} ______{Admin/MGMT}
- _____ 1 Day Track Sponsorship \$2500 \$ _____
______{Prosthetics} ______{Orthotics} ______{Pedorthics} ______{Admin/MGMT}
- _____ Platinum Sponsorship \$2000 \$ _____
- _____ Gold Sponsorship \$1200 \$ _____
- _____ Silver Sponsorship \$800 \$ _____
- _____ Bronze Sponsorship \$600 \$ _____
- _____ Other _____ \$ _____

Grand Total: \$ _____

On-Site Representative(s) Contact Info:

1) Name: _____ Email: _____ Phone#: _____

2) Name: _____ Email: _____ Phone#: _____

3) Name: _____ Email: _____ Phone#: _____

4) Name: _____ Email: _____ Phone#: _____

Payment Information

- **Online:** Email this completed form to primefareeast@gmail.com and pay online: [PFE 2024 Online Payment](#) (No need to fill out Cardholder Info)
- **Checks:** Please make checks payable to PrimeCare O&P and mail with completed registration form to: PrimeCare O&P Network 2289 Cornwall St Germantown, TN 38138 (901)359-3936
- **Or email this completed form along with your payment information to:** primefareeast@gmail.com

Cardholder Information:

Name as it appears on card: _____ Type: AMEX. VISA. MC

Address: _____ City: _____ State: _____ Zip: _____

Card #: _____ Expiration Date: _____

Authorization Signature: _____ Security code: _____

(VISA and MC, 3 digit # on back of card. For AMEX, 4 digit # on front right of card.)

Exhibitors must make their own hotel reservations.

Contact the hotel directly and mention the PrimeFare East meeting and enjoy the special discounted room rate of \$289.00 per night.

Sheraton Grand Hotel | 623 Union Street | Nashville, TN 37219 | 615-259-2000

Or click the link to make your reservation with the discounted rate:

[Book your group rate for PrimeFare East Regional Scientific Symposium](#)

*Please help us avoid wasting food or resources. Meals are automatically included with your registration fee.

Friday Breakfast Reservation

June 28, 2024

_____ Yes, I will attend.

_____ No, I will not attend.

Friday Lunch Reservation

June 28, 2024

_____ Yes, I will attend.

_____ No, I will not attend.

Saturday Breakfast Reservation

June 29, 2024

_____ Yes, I will attend.

_____ No, I will not attend.

Saturday Lunch Reservation

June 29, 2024

_____ Yes, I will attend.

_____ No, I will not attend.

Our policy is that in the event the meeting cannot be held for any reason, we will provide a credit for paid registrants for an alternate meeting date.

NO REFUNDS

If you have any questions or need further information, please contact Cathie Pruitt at (901)359-3936.