

2019 WSPS Vendor Registration

Contact Information (to receive confirmation):

Name: _____
Address: _____
City: _____
State: _____ Zip: _____
Phone: _____
Email: _____

Company Information (for conference materials):

Company Name: _____
Contact Name: _____
Company Web Address: _____
Company Phone: _____

Vendor Booth Information:

Companies to Avoid: _____

On-Site Representatives (List name(s) as you would like them to appear on name badges:

1. _____
2. _____

Will you be attending the reception at the end of the conference? ☐ Yes ☐ No

Requests for special dietary or other accommodations: _____

Vendor Level

☐ \$3,000 - Gold ☐ \$1,500 - Silver

Electricity Required: ☐ Yes ☐ No

Method of Payment (WSPS's Tax ID - 20-4470800)

Total Enclosed \$ _____

☐ Check (Payable to WSPS) Check # _____

☐ Visa ☐ Mastercard ☐ Discover ☐ Amex

Card Number: _____

Expiration Date: _____ Security Code: _____

Name on Card: _____

Address: _____

City: _____ State: _____ Zip: _____

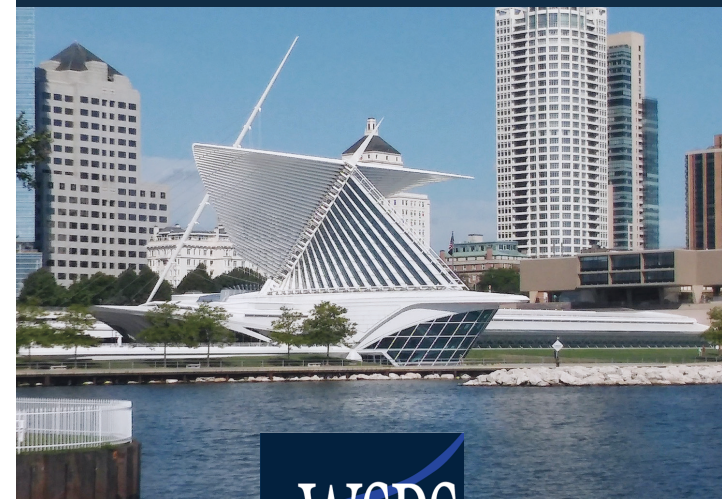
Note - Please mail in both registration form and payment

Wisconsin Society of Plastic Surgeons
563 Carter Court, Suite B, Kimberly, WI 54136
Fax 920-882-3655 | Email WSPS@badgerbay.co

Wisconsin Society of Plastic Surgeons
563 Carter Court, Suite B
Kimberly, WI 54136



2019 ANNUAL CONFERENCE



Wisconsin Society of Plastic Surgeons

Secondary Breast Augmentation & Other Updates

Friday, April 12, 2019

The Westin Milwaukee
Milwaukee, WI

VENDOR PROSPECTUS

VENDOR OPPORTUNITIES

\$3,000 - Gold Sponsor (limited availability)

Includes:

- Two (2) display tables with high visibility in vendor hall
- Recognition as Gold Sponsor in conference program
- Participation by up to four representatives at post-conference reception

\$1,500 - Silver Sponsor

Includes:

- One (1) display table in the vendor hall
- Recognition as Silver Sponsor in conference program
- Participation by one representative at post-conference reception

All vendors are invited to enjoy the continental breakfast, lunch and snacks with the meeting attendees. Join attendees at the post-event social and reception.

SCHEDULE (subject to change)

Thursday, April 11

4:30 - 6:30 pm Vendor set up

Friday, April 12

6:30 – 7:30 am Vendor set up

7:30 am – 6:30 pm Vendor hall open

5:00 – 6:30 pm Networking reception

REQUEST LETTERS

WSPS's Tax ID number is 20-4470800.

Request letters and W9 forms are available by contacting the WSPS office by email at WSPS@badgerbay.co.

LOCATION/SHIPPING INFORMATION

Exhibit materials may be shipped to:

The Westin Milwaukee

Attn: Event Management Department
550 N Van Buren Street
Milwaukee, WI 53202

All packages must clearly marked with, "Hold for WSPS, April 12, 2019." Also include your company's name and the total number of boxes in your shipment. Materials should be received no earlier than three (3) business days prior to the conference, or surcharges will apply. Coordination and fees related to shipping of exhibit materials to and from the conference are the responsibility of the exhibitor. The exhibitor assumes the entire responsibility and liability for losses, damages, and claims arising out of exhibitor's activities on the Hotel premises and will indemnify, defend and hold harmless the Hotel, its agents, servants and employees from any and all such losses, damages and claims.

HOTEL ACCOMMODATIONS

A room block has been set at the Westin Milwaukee at a rate of \$159 per standard room for the night of April 11, 2019. Call 414-224-5224 and mention the Wisconsin Society of Plastic Surgeons room block.

Deadline for reservations: March 14, 2019

REGISTRATION DEADLINE AND CANCELLATIONS

To ensure your company will be recognized in printed materials, please register prior to March 28, 2019. Cancellations and requests for refund must be received in writing by March 28, 2019. Refunds will be subject to a \$50 administrative fee. No refunds will be issued for no-shows.

SPECIAL SET UP

If your exhibit requires additional equipment, special set up assistance, phone lines, furniture or audio-visual equipment, please contact the WSPS office. Any special arrangements are made at the vendor's expense.

SPECIAL ASSISTANCE

Please include any special requests (e.g. physical, dietary) on the registration form.

QUESTIONS?

Please contact the WSPS office by phone at 920-750-7721 or by email at WSPS@badgerbay.co with questions.

Mail your completed registration form into the office, or register online at www.wisocietyplasticsurgery.com

