



EXHIBITOR MEETING

SPACE REQUEST

DEADLINE: APRIL 23rd, 2021

Company:		Booth Number:		
Contact Person:				
Address:		City:	State:	Zip Code:
Phone:		Fax:	Email:	
# Attending:	Day/Date of Function:	Start Time:	AM/PM	End Time: AM/PM
Meeting Name:				
ROOM SET		TYPE OF FUNCTION*		
Classroom	Theater	Breakfast	Lunch	Dinner
Conference	U-Shape			Reception
Hollow Square	Head Table			Meeting Only
Reception	Podium	*Selections above do not constitute an actual order. Once space has been assigned by SVS, a confirmation letter will be sent to the San Diego Convention Center and a catering representative will contact you to discuss your catering needs.		
Rounds/Banquet				
Other _____		A non-refundable \$300 placement fee is due for each room allocated. Space will be confirmed once payment has been processed. Upon receipt of a completed form, an invoice will be issued, including a link to our secure payment site. Only 2021 Vascular Annual Meeting Exhibitors are eligible to request space.		
AUDIO/VISUAL		Catering, special set fee, AV and labor are not included in the placement fee and will be the company's responsibility. Costs for any reset charges will be invoiced following the Annual Meeting. All meeting space is assigned on a first-come, first-served basis.		
LCD Projector		<p style="text-align: center;">Return completed form by April 23rd to: Debbie Wallentin, CMP, Director of Meetings Society For Vascular Surgery 9400 West Higgins Road Rosemont, IL 60018 dwallentin@vascularsociety.org</p>		
Laptop				
Screen (Front or Rear Projection)				
Internet Connection (Wired or Wireless)				
#of connections _____				
Easel(s) # _____				
Flipchart w/ Markers # _____				
Microphones #wired _____				
#wireless _____				