

Maryland Academy of Family Physicians
2012 Winter CME Conference
“Selected Challenges in Primary Care”
Saturday, February 25, 2012
Marriott Hunt Valley - Hunt Valley, Maryland

We understand that pre-registration is mandatory. Please reserve exhibit space for our company at the Maryland Academy of Family Physicians (MAFP) 2012 Winter Regional CME Conference. We understand that this application, when signed by us and accepted by MAFP, becomes a contract. We understand that for our exhibit fee we receive a space as best strategically located as possible. We agree to abide by the conditions herein and by all conditions under which space at the Marriott Hunt Valley is leased to MAFP.

FEE SCHEDULE (20% discount on 2nd space):

October 15 - November 30	\$500.00
December 1 - December 31	\$550.00
January 1 - January 31	\$600.00
February 1 - February 24	\$650.00

LIABILITY: We hereby release MAFP from any and all liabilities, loss or damage ensuing from any cause whatsoever, except for claims for damages or injuries caused or resulting from negligence of the MAFP or its agents and employees. In addition, we agree to hold harmless the MAFP from any and all claims for loss or damage asserted against the MAFP by any person as a result of, or in any way connected with, the wrongful acts or negligence of our company or of its representatives.

CANCELLATIONS: Cancellations and requests for refunds must be received in writing. MAFP will retain a 25% administrative service charge. Cancellations received after 30 days prior to the conference are subject to a 50% administrative charge.

Please Print _____

Company Name _____ # of Spaces _____

Contact Name/Title _____ Phone # _____

Address _____

City _____ State _____ Zip _____

Fax _____ Email _____

Authorized Signature _____ Date _____

Payment Method Check # _____ (Payable to MAFP) Visa MasterCard American Express

Credit Card # _____ Verif. # (front/back of card) _____ Exp. Date _____

Name on Card _____

Address on File With Visa/MC (If Different Than Above) _____ Zip _____



MARYLAND ACADEMY OF
FAMILY PHYSICIANS

SEND COMPLETED FORM WITH PAYMENT TO:

Maryland Academy of Family Physicians
5710 Executive Drive, Suite 104 • Baltimore, MD 21228
Phone: 410-747-1980 • Fax: 410-744-6059 • Email: info@mdafp.org

Confirmation with all details will be sent upon receipt.