



## Canadian Association of Cardiac Rehabilitation (CACR)

### 20<sup>th</sup> Annual Meeting & Symposium - Showcase 2010 Exhibitor Criteria and Application

October 23 & 24, 2010 - Palais des Congrès, Montreal

**The CACR Showcase is divided into 4 categories of exhibitors:**

**1. Cardiac Rehab Programs:**

The CACR covers the cost of one standard booth\* for eligible Cardiac Rehab Programs. This is an opportunity for CACR members from any CR program across Canada to share program innovations and locally developed resources with their colleagues. Approved programs must have at least one CACR member on staff and be represented at the conference by a CACR member registered for the conference. Promotions of special events or fundraisers do not qualify on their own. Additional equipment can be ordered directly from the CCC Congress official supplier to be invoiced directly to the program.

**2. Conference Sponsors:**

A minimum sponsorship of \$2,000 entitles a sponsor to one standard display booth. Additional equipment can be ordered directly from the CCC Congress official supplier to be invoiced directly to the sponsor. Sponsors are granted up to two complimentary registrations for the duration of the exhibit. Coffee breaks, Kellogg's breakfast, and Saturday lunch are also included.

**3. For-Profit Organization/Business:**

The purpose of these exhibits is to share information on available product directly related to cardiac rehabilitation. Exhibitors are responsible for paying exhibit booth rental costs of \$2,500 upon approval of their application. The CACR may waive this fee for exhibits related to its own activities. Booth space is assigned by CACR and is dependent upon available space. No financial transactions are allowed on-site. Each exhibit is granted up to two complimentary registrations for the duration of the exhibit. Coffee breaks, Kellogg's breakfast, and Saturday lunch are included. Up to two additional personnel are permitted and would be required to register for the conference under the CACR banner. (Special arrangements can be made to extend the member registration rate). \*\*

**4. Non-Profit Association:**

The purpose is to promote collaboration with other related non-profit organizations and encourage their participation upon invitation or approval. A fee of \$250 will include one standard booth and one complimentary registration for the duration of the exhibit. Booth space is assigned by CACR and is dependent upon available space. No financial transactions are allowed on-site. Up to two additional personnel are permitted and would be required to register for the conference under the CACR banner (special arrangements can be made to extend the member registration rate). \*\*

*\*A standard booth is one skirted table and up to two chairs (if required) or the equivalent space.*

*\*\* CACR member registration fees are \$320.*

**Criteria for Acceptance:**

All applications will be reviewed by the CACR and will be evaluated as to applicability to cardiac rehabilitation. Exhibitors deemed to be of most interest or most relevant to the CACR members or activities, will be accepted for exhibiting in the CACR Showcase. The accepted number will vary each year and is dependant upon available space in the conference facility.



**Canadian Association of Cardiac Rehabilitation (CACR) Showcase 2010**  
Exhibitor Application Form

20<sup>th</sup> Annual Meeting & Symposium  
October 23 & 24, 2010  
Palais des Congrès, Montreal.

**Date:** \_\_\_\_\_

**Category of exhibitor:**

- Cardiac Rehabilitation Program
- Conference Sponsor
- For-Profit Organization/Business
- Non-Profit Association

**Company or Cardiac Rehab Program Name:**

\_\_\_\_\_

**Delegate(s) representing the applicant at the booth:**

- \_\_\_\_\_  CACR Member
- \_\_\_\_\_  CACR Member

**Contact Information**

Work Address: \_\_\_\_\_

Work Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ Work Fax: ( \_\_\_\_\_ ) \_\_\_\_\_

Work Email: \_\_\_\_\_ Alt. email: \_\_\_\_\_

**Short Description of Potential Exhibit:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*\* All applications will be reviewed in a timely fashion and applicants will be notified of the results.*

**For office use only:**

- Accepted
- Not Accepted  Reason: \_\_\_\_\_

Date: \_\_\_\_\_ Approved by: \_\_\_\_\_