



## 2020 San Diego Urological Society

1950 Old Tustin Avenue, Santa Ana, CA 92705

TEL: 714-550-9155 / FAX: 714-550-9234

[www.SDurological.org](http://www.SDurological.org) / [info@SDurological.org](mailto:info@SDurological.org)

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The San Diego Urological Society invites your company to have the unique opportunity to exhibit at the upcoming quarterly SDUS society meetings in 2020 and meet San Diego urologists. We expect the meetings to be attended by approximately 30-40 academic and private practice urologists from San Diego County.

### **1. Exhibit Package :**

**Fee: \$2,600 Package Price**

- ❖ Table top exhibit during hosted welcome reception at 4 meetings during year
- ❖ Company support acknowledgement on society website, announcements at the meetings
- ❖ Up to three representatives to attend each meeting
- ❖ Networking with San Diego urology physicians during network reception

### **2. Speaker Program Option (Must be a full package exhibitor in order to participate) Fee: \$5,000**

- ❖ Your company sponsors a regularly scheduled meeting (based on availability and approval)
- ❖ Fee covers: Reception, Dinner, Audio Visual, Marketing, Registration, Meeting & Venue Coordination
- ❖ Does not cover speaker travel / honorarium

<u>Agenda for meetings:</u>	6:15 pm:	Arrival/display set up
	6:30 pm:	Hosted Network/Exhibit Reception with physicians
	7:40 pm:	Speaker/Dinner

#### Meeting Dates:

FEB20: Prostate Cancer Updates

MAR 26: Open - TBD

APR 23: UCSD & Balboa Naval Resident Research Presentations, SDYC

SEPT 20: Open - TBD

#### Payment(s) due prior to meeting date

The check should be made payable to San Diego Urological Society.

Please mail to: 1950 Old Tustin Avenue, Santa Ana, CA 92705 – attention Jeannie DeSantis. Please contact Jeannie DeSantis, Executive Director, at 714-550-9155 / [jeannie@wsaua.org](mailto:jeannie@wsaua.org) to confirm your attendance.

## San Diego Urological Society - Exhibitor Form

Company Name: \_\_\_\_\_

Contact: \_\_\_\_\_

Email: \_\_\_\_\_

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

City: \_\_\_\_\_

State: \_\_\_\_\_ ZIP \_\_\_\_\_

Tel: \_\_\_\_\_

Representative Name(s): \_\_\_\_\_

Representative Email(s): \_\_\_\_\_

**Select Package from below:**

1. Exhibit Package Fee: \$2,600

**Totals**

\$ \_\_\_\_\_

2. Exhibit Fee Per Meeting - \$800 per mtg.

\$ \_\_\_\_\_

**Add-ons:**

- 3 Minute Presentation before a meeting: \$250

\$ \_\_\_\_\_

- Eblast to SDUS Members: \$500

\$ \_\_\_\_\_

Grand Total \_\_\_\_\_ \$ \_\_\_\_\_

**Checks payable to San Diego Urological Society.** - FAX: 714.550.9234 / email: [info@sdurological.org](mailto:info@sdurological.org).

If mailing check, send to SDUS, 1950 Old Tustin Avenue, Santa Ana, CA 92705.

Credit Card:  **Visa/Mastercard**  **Discover**  **AMEX**

Card#: \_\_\_\_\_ Expire: \_\_\_\_\_ Security Code: \_\_\_\_\_

Cardholder Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Billing Address: \_\_\_\_\_ City: \_\_\_\_\_ St: \_\_\_\_\_ Zip: \_\_\_\_\_

Email for confirmation: \_\_\_\_\_

Credit card payments: I hereby authorize SDUS to debit my credit card account, the total fees as indicated above. **Please note that the transaction will appear on your statement under the name of "DMG SERVICES."**