



International Society for Quality of Life Research

Executive Office

6728 Old McLean Village Dr.

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www.isoqol.org

ISOQOL CONFERENCE ON PATIENT REPORTED OUTCOMES IN CLINICAL PRACTICE ~ JUNE 24-26, 2007 BUDAPEST, HUNGARY

EXHIBITOR PROSPECTUS

Cost of Exhibit Space: - \$1,000US per 6' table

Each Exhibitor will Receive:

- At the meeting, a list of all meeting registrants
- A listing on the ISOQOL website as an exhibitor
- A listing in the conference program with a brief description of your company
- Eligibility for discounts on hotel sleeping rooms
- One Complimentary conference registration and conference program

Space Assignment/Exhibit Schedule:

Space is assigned on a first-come, first-served basis. All coffee breaks, and the flow of the meeting, will be in the exhibit area.

Fire Regulations:

Fire codes require materials such as table covering, drapes, etc., to be flameproof. Use of heaters, open flames, candles, lanterns, etc., as part of an exhibit is forbidden.

Security: Each exhibitor is responsible for preservation of his or her own property.

Liability/Insurance: Exhibitors shall be fully responsible to pay for any and all damages to property owned by hotel, its owners or managers which results from any act or omission of an exhibitor. Exhibitor agrees to defend, indemnify, and hold harmless, ISOQOL and the hotel, its owners, managers, officers or directors, agents, employees, subsidiaries and affiliates, from any damages or charges resulting from exhibitor's use of the property. The exhibitor acknowledges that ISOQOL and the hotel do not maintain insurance covering exhibitors' property, and that it is the sole responsibility of the exhibitor to obtain liability insurance covering such losses. Each exhibitor, by signing an application to exhibit, understands and agrees that they assume responsibility for the conditions described above.

Additional Conditions:

1. ISOQOL, at its sole discretion, may withhold or withdraw permission to distribute souvenirs, advertising or other material it considers objectionable or not in keeping with the character or purpose of ISOQOL.
2. All exhibitor activity must take place in the assigned area only.
3. Neither the rental of exhibit space nor the provision of grant funds shall influence the control of content a selection of presenters and moderators. ISOQOL is ultimately responsible for content and

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selection of presenters and moderators.

4. Disclosure of Financial Relationships: ISOQOL will ensure disclosure to the audience of (a) company funding and (b) any significant relationship between ISOQOL and the company (e.g., grant recipient) or between individual speakers or moderators and the company.

Registration Procedure:

To register for the ISOQOL Annual Conference, please fill in the conference registration form completely and return with your exhibitor fee to the ISOQOL Executive Office. You may also register for the conference on-line at www.isoqol.org.

Conference Program Advertising:

ISOQOL accepts full, half, and eighth page advertisements, as space is available. The price structure is as follows:

1/8 - Page Ad - \$250

1/2 - Page Ad - \$600

Full - Page Ad - \$1,000

The conference program will contain information on all educational sessions and events taking place at the conference. The program will be distributed as part of the registration to attendees when they arrive at the conference. All orders must be received by May 25, 2007.

We also offer other advertising opportunities for this ISOQOL meeting. Please contact the ISOQOL Executive Office at info@isoqol.org for more information.

Conference Grants:

Numerous opportunities exist for companies to gain exposure at the conference through grant-supported activities. In addition, grants to the annual conference aid in supporting the continued work of the quality of life research community, scholarships, and ISOQOL in transforming health care in this country.

Grant providers will receive the following for their participation:

- A listing in the final conference program
- A listing on the ISOQOL website as a sponsor
- Signs at the activity indicating grant support
- Listing in the ISOQOL Newsletter following the conference

Conditions of Agreement:

1. All exhibits and advertisements are subject to review and approval by the International Society for Quality of Life Research.

2. This agreement shall not be binding upon the lessor (ISOQOL) until accepted and executed by ISOQOL. A counter-signed copy of the contract will be returned to you as confirmation of your participation.

3. The violation of any part of this agreement, or any part of the regulations adopted by the Lessor, shall at the election of ISOQOL cause this agreement to become null and void. In such event, all sums previously paid for or contracted to be paid under this agreement shall be assigned, or otherwise disposed of, without the written approval of ISOQOL.

4. Refunds of any payment for exhibit space will be made at the sole discretion of ISOQOL with a \$75 processing fee deducted from the total paid. No refunds due to cancellations will be made after May 25, 2007.

Return to:

ISOQOL Executive Office
6728 Old McLean Village Drive
McLean, Virginia 22101-3906 USA

Signature of Company Representative:

Date: _____

Signature of ISOQOL Representative

Date: _____

**June 24–26, 2007 ISOQOL Conference
Participation Contract
Exhibit Space Application
(Please Print or Type)**

Company Name:

Address:

City/State/Zip/Country

Phone/FAX/Email:

Contact Person/Title:

A. Company Description for Program (30 words or less)

B. Name of Exhibit Personnel for Badges: (Limited to 1 per table)

1. _____

2. _____

C. Exhibit Space Request:

_____ 6' tables @ \$1,000 each

D. Conference Grant:

Suggested Donation: \$5,000

Amount of Donation: \$ _____

E. Conference Program Advertising: (please provide electronic files with a minimum 300 dpi)

1/8 - Page Ad - \$250

1/2 - Page Ad - \$600

Full - Page Ad - \$1,000

Size of Ad _____ Price \$ _____

F. Payment and Contractual Considerations:

Full payment must accompany this application in order for space to be reserved. Payment may be made by check, wire transfer, MasterCard or VISA. ISOQOL's tax ID number is 54-1985637.

Total Amount Due: \$ _____

Check Amount \$ _____

Transferred \$ _____

Date: _____

Bill my credit card in the amount of \$ _____

Visa _____ MasterCard _____

Credit Card #: _____

Exp. Date: _____

Cardholder Signature: _____

Please return this contract to:

ISOQOL Executive Office
6728 Old McLean Village Drive
McLean, Virginia 22101-3906 USA,
or fax to: 703-556-8729

Thank you for your support and we look forward to seeing you!