



IDAHO ACADEMY OF
FAMILY PHYSICIANS
STRONG MEDICINE FOR IDAHO

777 N. RAYMOND, SUITE 100 BOISE, IDAHO 83704 • PHONE (208) 323-1156 • FAX (208) 323-9661

December, 2011

**64TH ANNUAL CONFERENCE OF THE
IDAHO ACADEMY OF FAMILY PHYSICIANS
MAY 18-19, 2012**

Dear Friends,

We invite you to participate in the 64th Annual meeting of the IAFP, scheduled May 18-19, 2012 at Shore Lodge, McCall, Idaho. The conference agenda is still in the planning process so an official agenda is not available at this time. We anticipate approximately 90 family physicians and primary care providers in attendance at this conference. If you are not the contact person for your firm, please contact Neva at Idahoafp@aol.com to update the information we have on file for your company.

EXHIBIT FEE The fee for a 6' draped table, chairs and electricity is \$550. Tabletop displays are recommended. Because of the difficulty in collecting delinquent display fees, please make arrangements to pay for your display fee at least 30 days prior to the conference.

APPLICATION FOR EXHIBIT SPACE MUST BE COMPLETED AND RETURNED Exhibits must be oriented toward and of interest to primary care physicians and are subject to approval by the IAFP Program Committee. Spaces will be assigned as contracts are received.

Please send your contract as soon as possible, as we cannot hold spaces without an application on file. Late assignments and changes may not make the printed deadline.

Exhibit Set-up is after 6:00pm on Thursday, May 17th with displays open from 7:30am on Friday, May 18th through Noon on Saturday, May 19th. A block of rooms has been reserved for the conference at Shore Lodge so if you need reservations please contact the hotel at 1-800-657-6464 and use the group code **Idaho Academy of Family Physicians** to receive the group rate.

If you have any questions regarding this meeting, please contact:

SAM SUMMERS, MD
Program Chair
208-459-3621

NEVA SANTOS, CAE
OR Executive Director
208-323-1156 or Idahoafp@aol.com
FAX: 208-323-9661

Enclosures: Application to Exhibit - **complete and return to hold your space**
Exhibitor Layout

IDAHO ACADEMY OF FAMILY PHYSICIANS, INC.
777 N. Raymond • Boise, ID 83704 • (208) 323-1156
Tax ID Number 23-7014787

APPLICATION FOR EXHIBIT SPACE

Please reserve space for our exhibit at the:

64th Annual Meeting of the
IDAHO ACADEMY OF FAMILY PHYSICIANS
May 18-19, 2012 Shore Lodge, McCall, Idaho
Tabletop Displays Recommended Tax ID # 23-7014787

We understand that this application becomes a contract when signed by us and accepted by the Chapter. We agree to abide by the conditions of the contract published on the reverse side of this application.

Fee for the above meeting: \$550 per space - (Includes one 6' draped table; chairs and electricity)

Payment may be made with a Visa or Master Card. NOTE: Exhibit Fees are due 30 days prior to first day of exhibit.

- EXHIBITOR -

Please complete, sign and return both copies of this application to the Idaho Academy of Family Physicians, Inc. at the above address.

LOCATION: (Please see enclosed floor plan with numbered exhibit spaces.)

1st Choice _____ 2nd Choice _____ 3rd Choice _____

COMPANY NAME: _____

REPRESENTATIVE(S) ATTENDING THIS MEETING:

_____ Name	_____ Name
_____ Address	_____ Address
_____ Phone	_____ Phone

Authorized Signature _____ Date _____

As stated in the terms of this agreement, I authorize payment of the above display fee and agree to pay the designated fee to the IAFFP.

CHAPTER OFFICE: Assignment of space and signature below indicate acceptance of application by the Idaho Academy of Family Physicians, Inc.

Exhibit Space Assigned: _____ Payment Received: _____

By _____

Please see other side for "CONDITIONS OF CONTRACT TO EXHIBIT"

64TH ANNUAL CONFERENCE OF THE IDAHO ACADEMY OF FAMILY PHYSICIANS'

MAY 18-19, 2012

EXHIBIT HALL FLOOR PLAN

Windows To The Lake

1	2	3	4	5	6
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Refreshments and meals

23	24
30	29
	25
28	
	26
27	

	15
22	
	16
21	
	17
20	
	18
19	

	7
14	
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13	
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12	
	10
11	

Fire-place

Refreshments

ENTRY

ENTRY