



Exhibitor Booth Space Application

Booth Preference: Please review the available booth space in the grid BEFORE indicating your five booth preferences for SAM 2024.

DATE OF REGISTRATION

**Placement cannot be guaranteed, but every effort will be made to honor your first choice. In areas of conflict, priority will be given to companies that have demonstrated financial support to the Association, as well as attendance seniority.*

/ /

1st: 2nd: 3rd: 4th: 5th:

Please list exhibitors you do NOT want to be placed near.

<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

BOOTH FEES

A deposit of **\$1,000 for single** and **\$1,800 for double** must accompany application to reserve a space. To avoid an additional charge of \$150 per booth, **full payment MUST be made on or before December 18, 2023.**

*Please see "CANCELLATIONS" clause in the Exhibitor Rules and Regulations should you need to cancel.

No exhibit may be assembled until the fee is paid in full.

<input type="checkbox"/> Visa	Card Number <input type="text"/>	Exp. Date <input type="text"/>	CVV <input type="text"/>
<input type="checkbox"/> MasterCard	Cardholder Name <input type="text"/>		
<input type="checkbox"/> American Express	Cardholder Signature <input type="text"/>		
<input type="checkbox"/> Check Enclosed	Billing Address <input type="text"/>		

Please make checks payable to Florida Podiatric Medical Society, Address: 3375-F Capital Circle NE, Ste. 201, Tallahassee, FL 32308

Charge For: ☐ Entire booth cost ☐ Deposit Only

Signature:

COMPLIMENTARY BADGES

It is our pleasure to include two (2) complimentary badges and two (2) complimentary lunches per booth.

To receive a printed badge, all company representative names must be submitted no later than **December 18, 2023.**

Badge Names:

*Any additional badges/lunches may be purchased for \$40.00 each