

Best Care Practices in the Post-Acute & Long-Term Care Continuum 2017

FMDA – The Florida Society for Post-Acute and Long-Term Care (FMDA)
Florida Chapters of Gerontological Advanced Practice Nurses Association (GAPNA)
National Association Directors of Nursing Administration in LTC (NADONA)
Florida Geriatrics Society (FGS)

Product Theater Application & Guidelines

Best Care Practices in the Post-Acute & Long-Term Care Continuum 2017 (BCP) will be held Oct. 12-15, 2017, at **Disney's Grand Floridian Resort**, 4401 Floridian Way, Lake Buena Vista, FL 32830. Joint-providership is through **AMDA – The Society for Post-Acute and Long-Term Care Medicine** and **FMDA – The Florida Society for Post-Acute and Long-Term Care Medicine** and is planned in collaboration with Florida Chapters of GAPNA, NADONA, and FGS. BCP will also feature the **26th Annual Meeting** of FMDA.

Due to the success of previous years' efforts, we are once again offering opportunities for industry to hold non-CME/CPE/CE educational programs in conjunction with this annual program. We expect to attract more than 250 physicians, physician assistants, pharmacists, advanced practice nurses, directors of nursing, and other senior health care professionals seeking the latest in clinical and practice-oriented information.

Companies funding program proposals **must be** exhibitors and/or official supporters of **Best Care Practices in the Post-Acute & Long-Term Care Continuum 2017**. All external programming intended for attendees of this meeting must be submitted in the form of an application. Please be advised that no outside events can be held at or in conjunction with the conference without prior approval.

Product Theaters — Non-CME/CPE/CE Program Opportunities:

- There are ten (10) non-CME lunch- and dinner-presentation slots for companies that would like to host registered attendees of this conference.
- The topic for the presentation is yours to choose. The speaker choice is yours. The menu selection is yours, as well.
- We will help you secure a private room at the conference hotel, promote your event to our attendees, facilitate onsite sign-ups, and help make your event a big success. However, our efforts are only a supplement to your own marketing plans to aggressively promote your product theater.
- In addition, we will include the following audiovisual equipment, if requested: **1. Laptop, 2. Digital projector, 3. Projection screen, 4. Wired mic.**

THURSDAY: There are four (4) lunch- and dinner-presentation opportunities on **Thursday, Oct. 12** — the pre-conference day. There will be only two (2) luncheons available for the **11:50 a.m.-12:50 p.m.** time slot, and they will be open to all attendees.

Major CME presentations are already scheduled for Thursday, so the luncheons are a natural fit. Your luncheon will be preceded and/or followed by workshops so you can expect 25-50* practitioners in attendance for each luncheon. The administrative fee, which is payable in advance, is **\$3,500** per slot or **\$5,995** for both slots.

There are also two (2) **6:30-7:30 p.m.** dinner slots, where you can expect 50-75* practitioners per dinner. The administrative fee, which is payable in advance, is **\$5,000** per slot, or **\$8,500** for both slots.

FRIDAY: There are four (4) lunch- and dinner-presentation opportunities on **Friday, Oct. 13** — the first official day of the conference.

You can expect 60-85* practitioners in attendance at each luncheon, which is scheduled from **12 to 1 p.m.** and will be open to all attendees. The administrative fee, which is payable in advance, is **\$7,000** for one or **\$11,900** for both luncheon slots.

There are also two (2) **7:15-8:15 p.m.** dinner slots, where you can expect 45-65* practitioners at each dinner. The administrative fee, which is payable in advance, is **\$6,500** per slot or **\$11,050** for both slots.

SATURDAY: A maximum of two (2) dinner programs may be scheduled after the Presidents' Wine & Cheese Reception, which ends at 7:30 p.m., **Saturday, Oct. 13**. This unique opportunity is available only to conference exhibitors or their representatives, and no other dinners will be allowed. You can expect 40-55* participants per dinner. The administrative fee, which is payable to FMDA in advance, is **\$6,000** per slot or **\$10,200** for both slots, which run **7:45 to 9 p.m.**

EXPENSES: In addition to the administrative fee for each slot, the applicant is responsible for all expenses related to food and beverage, audiovisual equipment beyond what is included, and any speaker honorarium and/or speaker travel expenses, etc.

** These are estimates only. An absolute number of attendees is not guaranteed.*

Application Procedures & Slot Assignment

If you have an interest in reserving one or more of these slots, please contact **Ian Cordes** at **(561) 689-6321** as soon as possible, before they are taken. Companies interested in securing one or more of these sessions must complete and return an unaltered application form for each slot they wish to reserve. Applications that have been modified will not be accepted. Completed forms are due no later than **Friday, May 26, 2017**.

Please fax all completed application forms to (561) 689-6324 or e-mail to **icordes@bellsouth.net**. Slots will be confirmed after final decisions are made. Upon confirmation, applicants are required to return all documents and fees by the deadlines identified in the confirmation information, or the slot may be awarded to another applicant. Please decide promptly, as we expect that all slots will be quickly filled.

Single slots are limited to a maximum number of attendees as determined by FMDA unless the hosting company agrees to reserve the competing slot.



FMDA – The Florida Society for Post-Acute and Long-Term Care
400 Executive Center Drive, Suite 208, West Palm Beach, FL 33401

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Product Theater Application

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The fee to secure any of the ten (10) time slots is shown below. Should your program be approved and assigned a time slot, you will be sent an invoice for the sponsorship fee. Failure to pay the fee by the invoice deadline will result in a reassignment of the time slot (you will still be responsible for the administrative fee). All costs associated with speakers, food, beverage, marketing, and audiovisual equipment (not already included) will be the responsibility of the applicant. It will be expected that the maximum number of attendees will be accommodated. **Please remit your payment at this time, payable to "FMDA," or "Best Care Practices." FMDA is a not-for-profit corporation. Its federal tax identification number is 59-3079300.**

1. Program Title: _____

2. Program Description (as it should appear in meeting materials, 50 words or less): _____

3. Presenter:

Name: _____ Title: _____ Email: _____

Organization: _____

Address: _____

City/State/ZIP: _____

Telephone: _____ Fax: _____

4. Time Slots Preferred: (Please complete a separate application if applying to host more than one program.)

Choice	Time (subject to change)	Audience	Date	Admin. Fee	Plus
_____	1. 11:50 a.m.-12:50 p.m.	All	Thursday, Oct. 12	\$3,500 each	Lunch
_____	2. 11:50 a.m.-12:50 p.m.	All	Thursday, Oct. 12	\$3,500 each	Lunch
_____	3. 11:50 a.m.-12:50 p.m.	All	Thursday, Oct. 12	\$5,995 both (#1+2)	Lunch
_____	4. 6:30-7:30 p.m.	All	Thursday, Oct. 12	\$5,000 each	Dinner
_____	5. 6:30-7:30 p.m.	All	Thursday, Oct. 12	\$5,000 each	Dinner
_____	6. 6:30-7:30 p.m.	All	Thursday, Oct. 12	\$8,500 both (#4+5)	Dinner
_____	7. 12-1 p.m.	All	Friday, Oct. 13	\$7,000 each	Lunch
_____	8. 12-1 p.m.	All	Friday, Oct. 13	\$7,000 each	Lunch
_____	9. 12-1 p.m.	All	Friday, Oct. 13	\$11,900 both (#7+8)	Lunch
_____	10. 7:15-8:15 p.m.	All	Friday, Oct. 13	\$6,500 each	Dinner
_____	11. 7:15-8:15 p.m.	All	Friday, Oct. 13	\$6,500 each	Dinner
_____	12. 7:15-8:15 p.m.	All	Friday, Oct. 13	\$11,050 both (#10+11)	Dinner
_____	13. 7:45-8:45 p.m.	All	Saturday, Oct. 14	\$6,000 each	Dinner
_____	14. 7:45-8:45 p.m.	All	Saturday, Oct. 14	\$6,000 each	Dinner
_____	15. 7:45-8:45 p.m.	All	Saturday, Oct. 14	\$10,200 both (#13+14)	Dinner

5. Applicant Contact Information:

Name: _____ Title: _____ Email: _____

Company: _____

Address: _____

City/State/ZIP: _____

Telephone: _____ Fax: _____

6. Proposed Program Coordinator (if different from the applicant contact name or company):

Name: _____ Title: _____ Email: _____

Company: _____

Address: _____

City/State/ZIP: _____

Telephone: _____ Fax: _____

7. I agree that the information provided herein is correct; and I have read, understood, and agree to abide by the guidelines for hosting these non-CME/CPE/CE product theaters. This application must be signed by an authorized representative of the applicant; and he or she understands that, once submitted, this application is non-cancellable and not contingent upon funding approval (funding should be approved prior to submitting an application).

Approved by: _____

Signature

Date

Name: _____ Title: _____ E-mail: _____