

## CIRCULATION:

The Attendee Information Booklet will be distributed to approximately 2,400 attendees at the annual meeting. The Booklet will contain all final program information.

## INDUSTRY ADVERTISING POLICY:

The American Society for Metabolic and Bariatric Surgery (ASMBS) welcomes advertising in its publications and at its educational events as an important means to keep the bariatric surgical community informed of products and services for bariatric and metabolic surgery. Such advertising must be factual, dignified, tasteful, and intended to provide useful product and service information. These standards apply to all product-specific promotional material submitted to ASMBS programs.

Advertisements must not be deceptive or misleading. All claims must be supported by data and be meaningful in terms of performance and other benefits. ASMBS reserves the right to request additional supporting information as needed.

Advertisements should include footnotes where testing methodology and statistical analysis are identified. References from surgical and scientific literature are acceptable, provided the facts cited are truthful, fair, accurate, and represent fairly the body of literature regarding the claim.

## ADS ARE NON-COMMISSIONABLE

## DEADLINE:

Ad order, including sample piece, must be submitted by **April 23, 2012** for approval.

Final approved piece must be submitted digitally by **May 11, 2012** to ensure placement in the 2012 Program Book.

## AD SPECIFICATIONS

All ads are full color, CMYK

### Acceptable formats:

- Adobe Illustrator EPS or AI with all fonts converted to outline; must be saved as CS4 or lower.
- PDF with all fonts embedded
- 300 dpi CMYK tiff or jpeg

### Finished maximum ad sizes:

- Full page  
Trim size: 8.5" x 11" (Allow an additional 1/8" (.125") all around for full bleed ads)
- One-half page horizontal  
Trim size: 8.5" x 5.5" (Allow an additional 1/8" (.125") all around for full bleed ads)

## ADVERTISING CONTACT:

Please provide the following information.

Company Name

Address

City State Zip Country

Advertising Contact Person

Telephone Fax Email

### Please indicate if your ad requires specific orientation:

Right Page  Left Page  None

### Please select one of the following:

Full Page Half Page  
 Exhibitor - \$1,500  Exhibitor - \$800  
 Non-Exhibitor - \$2,250  Non-Exhibitor - \$1,200

TOTAL COST OF AD: \_\_\_\_\_

50% DEPOSIT REQUIRED WITH ORDER PLACEMENT ON APRIL 23, 2012: \_\_\_\_\_

BALANCE DUE WITH FINAL APPROVED AD ON MAY 11, 2012: \_\_\_\_\_

See Page 22 for Payment Information

# Payment Information

## METHOD OF PAYMENT:

MasterCard       Visa       American Express       Check (payable to ASMBBS)

Name Printed on Card: \_\_\_\_\_ Amount Authorized: \_\_\_\_\_

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

Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Cardholder's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### Please return completed form to:

Pat Watson | watsonp@asmbs.org | F: 352-331-4975  
100 SW 75th Street, Suite 201, Gainesville, FL 32607

By signing below, the Company named in this Application & Contract to Exhibit acknowledges and agrees to comply with all rules, regulations, policies, terms and conditions contained in the Exhibitor Prospectus and the ASMBBS Exhibitor Rules and Regulations, and any amendments thereto, all of which are expressly incorporated herein by this reference, as well as with all decisions ASMBBS regarding the Annual Meeting. This contract shall not be binding until signed by authorized representatives of Company and ASMBBS. ASMBBS reserves the right, in its absolute discretion, to deny this Application & Contract to Exhibit. Company agrees to distribute the Exhibitor Prospectus and the ASMBBS Rules and Regulations to all of Company's personnel involved with exhibiting at the Annual Meeting. The person executing this Application & Contract to Exhibit on behalf of Company has full power and authority to execute this Application & Contract to Exhibit on behalf of Company and to bind Company its terms. This Application & Contract to Exhibit shall be interpreted and enforced according to the laws of the State of Florida.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_