**FAMILY MEDICINE FORUM – FMF 2022**

Application for Exhibit Space and Sponsorship

Toronto - November 9-12 | Virtual - Nov 16-19 On-Demand until Dec 20th

Please reserve your exhibit space and/or sponsorship opportunity at FMF. This application becomes a contract when accepted by the College of Family Physicians of Canada (CFPC). The CFPC reserves the right to substitute or withdraw exhibit space or sponsorship opportunities at its discretion. The exhibitor/sponsor agrees to abide by the conditions of contract listed in the FMF *Policies and Guidelines*. The exhibitor/sponsor also agrees to strictly follow CMA standards, National Standards, Innovative Medicines Canada (where applicable) and any additional guidelines or amendments as required by the CFPC. The dates, venue or location is subject to change at the discretion of the CFPC. The exhibitor/sponsor accepts responsibility to inform all agents,staff, contractors and reps of these conditions and agree that they wll also abide by these conditions.

Legal Company Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City | Province: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Postal Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Primary Contact: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cell Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Alternate Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Alternate Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Exact Booth Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Website: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Which category would best describe your business for your listing in the Official Exhibitor Guide (select one):

[ ]  **Academic (DFMs)** [ ]  **Association** [ ]  **Clinical Services** [ ]  **Educational** [ ]  **Financial**

[ ]  **Government** [ ]  **Market Place** [ ]  **Medical Device** [ ]  **Nutrition** [ ]  **Over the Counter**

[ ]  **Pharmaceuticals** [ ]  **Practice Management** [ ]  **Recruiter** [ ]  **Other**

Have you exhibited at FMF in previous years? [ ]  YES [ ]  NO

Do you offer ANY products or services related to cannabis, homeopathy or naturopathy? YES [ ]  NO [ ]

*Note: if yes, the FMF exhibit hall prohibits cannabis, homepathy or natupathic products, please contact us to discuss*

Do you agree to follow [CMA Policy](https://www.cma.ca/guidelines-interacting-industry), [National Standard](http://www.cfpc.ca/uploadedFiles/CPD/National%20Standard%20for%20Support%20of%20Accredited%20CPD%20Activities%20FINAL%20ver%2023-1.pdf), [FMF Policies & Guidelines](https://fmf.cfpc.ca/exhibitors/) and ammendments? YES [ ]  NO [ ]

Important: Submit your booth staff and 40 word description for the Official Exhibitor Guide [here](https://survey.alchemer-ca.com/s3/50130633/2022-FMF-Exhibit-Profile-Collection)

**EXHIBIT SPACE TYPE IN PERSON VIRTUAL QUANTITY TOTAL**

20’ x 30’ Island [ ]  $34,025 n/a \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_

20’ x 20’ Island [ ]  $22,900 n/a \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_

10’ x 30’ Prime [ ]  $17,050 n/a \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_

10’ x 20’ Prime [ ]  $11,525 n/a \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_

10’ x 10’ Prime or corner [ ]  $6,025 n/a \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_

10’ x 10’ Regular [ ]  $5,575 [ ]  $3,000 \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_

10’ x 10’ Government | NFP [ ]  $4,385 [ ]  $2,000 \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_

10’ x 10’ Charity [ ]  $1,425 [ ]  $1,000 \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_

6’ x 5’ Mini [ ]  $1,215 n/a \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_

Registration # required for Charity \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**OFFICIAL EXHIBITOR GUIDE ADVERTISEMENT RATES**

[ ]  DPS: $5,200 | [ ]  Full Page: $3,250 | [ ]  Half: $1,950 | [ ]  Quarter: $1,150 | [ ]  Logo: $250 \_\_\_\_\_\_\_\_\_\_\_

[**SPONSORSHIP**](https://cfpc-my.sharepoint.com/personal/ilamb_cfpc_ca/Documents/Desktop/2021%20Exhibitor%20and%20Sponsor%20Prospectus_Final.pdf)**S** Are you are interested in learning more about sponsorship at FMF [ ]  In Person [ ]  Virtual

Sponsorship Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [ ]  In Person [ ]  Virtual \_\_\_\_\_\_\_\_\_\_\_

Sponsorship Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [ ]  In Person [ ]  Virtual \_\_\_\_\_\_\_\_\_\_\_

Note: Taxes will be added per provinicial requirements. An invoice with available payment methods will be provided. GST/HST 108078023, QST 1201629558

Signing Officer: Signature:

Title: Date:

**Please complete and send to** **fmfexhibits@cfpc.ca** **or call 1.800.387.6197 ext. 800 | For more information** [**click here**](https://fmf.cfpc.ca/exhibitors/)