



EXHIBITOR & SPONSORSHIP PROSPECTUS

# ACDS Fall Meeting

OCTOBER 1-2, 2021

WYNDHAM PHILADELPHIA HISTORIC DISTRICT

*Innovations in Dermatitis*  
*What's New and Hot*



ACDS Fall Meeting OCTOBER 1-2, 2021 • PHILADELPHIA, PA EXHIBITOR PROSPECTUS

**American Contact Dermatitis Society**

555 East Wells Street, Suite 1100  
Milwaukee, WI 53202  
Phone: (414) 918-9805  
Fax: (414) 276-3349  
Email: info@contactderm.org



**Fall Meeting Highlights**

*The ACDS Fall Meeting is a two-day meeting focusing on innovations in dermatitis with an emphasis on “What’s New and Hot.”*

**Roundtable Luncheon**

- The Fall Meeting will feature a Roundtable Luncheon each day with ACDS updates.

**Exhibits and Posters**

- Exhibits from leading pharmaceutical and manufacturing companies will be available along with poster abstracts. All breaks are served near the exhibit area to increase visibility.

**Networking Social**

- Join us after the meeting for a networking social event at The Revolution House on Friday, October 1 from 6:00pm to 8:00pm.

# American Contact Dermatitis Society Fall Meeting Wyndham Philadelphia Historic District Invitation to Exhibit—October 1-2, 2021

The American Contact Dermatitis Society (ACDS) was founded in 1989 and has grown from a small dedicated group of dermatologists focused on contact dermatitis to over 1,800 health care professionals in the field of allergic contact dermatitis and related inflammatory skin diseases. ACDS is known for its Contact Allergen Management Program (CAMP) which provides patients with a safe list of personal and household products that assists patients in managing their allergic contact dermatitis.

The ACDS is pleased to present an exhibit program in conjunction with its Fall Meeting. The exhibit program will provide the physicians with first-hand information about products and services specific to the area of contact dermatitis and serve as a forum for updating the physician’s knowledge of current technological advances in the field.

The ACDS Fall Meeting offers you the opportunity to bring your products to the attention of about 150 physicians and specialists from all over the world in the field of contact and atopic dermatitis and occupational dermatology.

## EXHIBIT INFORMATION

The exhibit program will be limited to table top exhibits, which includes one 6’ covered table, two (2) chairs, and an identification sign. There is no provision for drain, water, electricity or permanent installations of any kind. Your display must fit on one 6’ table. If you have a large piece of equipment to display you may place it directly behind or in front of your table.

## LOCATION

The Fall Meeting will be held at the Wyndham Philadelphia Historic District. Morning and afternoon coffee breaks and poster presentations will be located near the exhibit area.

## EXHIBIT DATES AND HOURS

**Set-Up**

Friday, October 1, 6:30am- 8:00am

**Display Times**

Friday, October 1, 9:00am- 3:00pm  
Saturday, October 2, 9:00am- 3:00pm

**Removal**

Saturday, October 2, 3:00pm- 4:00pm



## CRITERIA FOR ACCEPTANCE

Permission to exhibit may be granted to firms only if their proposed exhibit meets the following criteria:

- The products or services relate specifically to the medical and scientific aspects of the practice of contact dermatitis and/or dermatology;
- The products or services to be displayed are safe when used in accordance with the instructions or recommendations of the applicant;
- The products or services to be displayed contribute significantly to the educational purposes of the Fall Meeting.
- Products and/or services that may be considered competitive to those provided by ACDS, are not eligible to exhibit at ACDS sponsored meetings.

## REVIEW PROCESS

Applications will be reviewed to determine whether they satisfy the Criteria for Acceptance.

- Each applicant must supply specific information concerning the products or services to be displayed.
- When deemed necessary, additional supporting data may be requested from the applicant.
- Permission to exhibit will in no way constitute an official endorsement of any firm, their products or services.

## ASSIGNMENT OF SPACE

Space will be assigned on a first-come, first-served basis. Those contributing \$12,000 or more will receive priority in determining table location.

## EXHIBIT FEES

Exhibit fees are \$2,000 per table. This fee includes:

- One 6' covered table
- Two (2) chairs
- Identification sign
- Complimentary registration for two representatives with admission to:
  - Scientific Sessions within exhibitor guidelines
  - Breakfast, Lunch & Coffee Breaks
  - Invitation to Networking Social
- Participation in the "Visit the Exhibits" Incentive
- Access to hard-copy mailing labels of those conference attendees who authorize permission. (Available in a hard-copy format only and intended for a one-time use.) Additional fee of \$200 applies.

## TERMS OF PAYMENT

Table top fees are \$2,000 per table. Full payment in U.S. funds of \$2,000 must be submitted with the application for exhibit space. No application will be processed or space assigned until the full payment is received. Space must be fully paid for by July 24, 2021. If assigned space is not paid for by July 24, 2021, it may be reassigned or cancelled.

No refunds will be made in the event of cancellation after July 24, 2021.

The acceptance of payment by the American Contact Dermatitis Society with an application does not in any way constitute acceptance of the application. If an application is subsequently denied, a full refund of the exhibit fee will be issued promptly.

## REGISTRATION

No exhibitor will be admitted to the exhibit area without an exhibitor's badge. Each exhibitor is allowed (2) registrations per table top without charge. Additional representatives may be registered for \$100 each.

Registration packets and exhibitor badges will be available for pickup at the Registration Table on the morning of the meeting.

## COMMERCIAL SUPPORT AND PROMOTION

The American Contact Dermatitis Society (ACDS) is committed to presenting CME activities that promote improvements or quality in health care and are independent of the control of commercial interests.

### APPROPRIATE USE OF COMMERCIAL SUPPORT AND PROMOTION

Arrangements for commercial exhibits or advertisements cannot influence planning or interfere with the presentation, nor can they be a condition of the provision of commercial support for CME activities. Product-promotion material or product-specific advertisement of any type is prohibited in or during the CME activity. The juxtaposition of editorial and advertising material on the same products or subjects is not allowed. Live or enduring promotional activities must be kept separate from the CME activity. Promotional materials cannot be displayed or distributed in the education space immediately before, during or after a CME activity. Commercial Interests may not engage in sales or promotional activities while in the space or place of the CME activity.



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## GENERAL MEETING SUPPORT OPPORTUNITIES

General meeting support allows the American Contact Dermatitis Society to use the funds for the Fall Meeting as it sees fit. Examples of this could be AV needs, room rental, photographer, etc. All sponsors who give general meeting support will be recognized on official event signage and prominent listings in the official event mobile app.

### PLATINUM LEVEL - \$20,000+

#### Sponsor Acknowledgement

Recognition to Platinum Level sponsors with prominent placement on the following conference materials:

- Conference website
- Final program
- Event signage
- Mobile app splash screen

#### Four Complimentary Conference Registrations

Four complimentary registrations, including attendance at all sessions, breakfast, lunch, networking breaks, and the evening networking social

#### Exhibit Table

Exhibit table in a prominent location

#### “Visit the Exhibits” Incentive

Participation in the “Visit the Exhibits” Incentive

#### Attendee Mailing Labels – Two Sets

Access to hard-copy mailing labels to be used before and after event, except where privacy laws exclude attendees from being included.

### GOLD LEVEL ~ \$15,000

#### Sponsor Acknowledgement

Recognition to Gold Level sponsors with premium placement on the following conference materials:

- Conference website
- Final program
- Event signage
- Mobile app

#### Two Complimentary Conference Registrations

Two complimentary registrations, including attendance at all sessions, breakfast, lunch, networking breaks, and the evening networking social

#### Exhibit Table

Exhibit table in premium location

#### “Visit the Exhibits” Incentive

Participation in the “Visit the Exhibits” Incentive

#### Attendee Mailing Labels – One Set

Access to hard-copy mailing labels except where privacy laws exclude attendees from being included

### SILVER LEVEL ~ \$10,000

#### Sponsor Acknowledgement

Recognition to Silver Level sponsors on the following conference materials:

- Conference website
- Final program
- Event signage
- Mobile app

#### Conference Registration

Two complimentary registrations, including attendance at all sessions, breakfast, lunch, networking breaks, and the evening networking social

### BRONZE LEVEL ~ \$5,000

#### Sponsor Acknowledgement

Recognition to Bronze Level sponsors on the following conference materials:

- Conference website
- Final program
- Event signage
- Mobile app

#### Conference Registration

Two complimentary registrations, including attendance at all sessions, breakfast, lunch, networking breaks, and the evening networking social

## AMERICAN CONTACT DERMATITIS SOCIETY

555 EAST WELLS STREET,  
MILWAUKEE, WI 53202  
WWW.CONTACTDERM.ORG  
INFO@CONTACTDERM.COM  
414-918-9805  
414-276-3349 (FAX)



## EVENT, ACTIVITY OR MARKETING OPPORTUNITIES

Sponsoring an official conference event, activity or marketing opportunity not only offers a more rewarding experience for attendees, it increases your organization's visibility among them. In addition, ACDS gives special recognition to sponsors through official signs and listings in the official event mobile app.

### **BREAKFAST MEETING (\$8,000 PER DAY)**

Attendees would enjoy a continental breakfast sponsored by your company. If sponsor would like to provide napkins, cups, etc., please notify ACDS.

### **NETWORKING BREAKS (\$5,000 PER BREAK)**

Spaced at convenient times during the conference schedule. If sponsor would like to provide napkins, cups, etc., please notify ACDS.

### **LUNCH (\$10,000 PER DAY)**

Your company would sponsor the Round Table Lunch, where short Society updates would be given. If sponsor would like to provide napkins, cups, etc., please notify ACDS.

### **NETWORKING SOCIAL (\$12,000)**

Guests will enjoy a two hour networking social at the close of the meeting sponsored by your company. If sponsor would like to provide napkins, cups, etc., please notify ACDS.

### **TABLE-TOP EXHIBIT (\$2,000)**

One 6' table top exhibit space in Exhibit area. Networking breaks and poster displays will be held near the Exhibit area. Those contributing \$12,000 or more will receive priority in determining table location.

### **WIFI ACCESS (\$2,500)**

ACDS would like to provide attendees with Internet access. The sponsor would be acknowledged in conference literature and signage throughout the conference.

### **MOBILE APP (\$3,500)**

ACDS offers an event mobile app for attendees to explore information about programming, speakers, exhibitors, and abstracts. Achieve maximum exposure with sponsor's name on the opening page with a link directed to their listing in the exhibitor directory.

### **REGISTRATION INSERTS (\$750)**

ACDS will insert your company's flyer or other information (with preapproval) into the registration packet. Sponsors are responsible for the cost of printing.

### **MAILING LABELS (\$200 PER SET)**

Access to conference attendee mailing labels who have authorized permission. Labels are available before and/or after the meeting. Limit two sets of labels.

*Note: The ACDS mailing labels are not available in electronic format and are intended for a one-time use only.*

## **OTHER SPONSORSHIPS AVAILABLE – GOT ANOTHER IDEA?**

ACDS will work with you to develop a sponsorship program tailored to your specific needs.

The items listed above are just a sample of the sponsorships available.

Call ACDS at (414) 918-9805 or email [info@contactderm.org](mailto:info@contactderm.org) to discuss options.

## ACDS EXHIBIT RULES AND REGULATIONS

### ADA Compliance

Each exhibitor is responsible for compliance with the Americans with Disabilities Act (ADA) within its booth and assigned space.

### Advertising

ACDS does not endorse or promote any products or services related to an exhibit. The use of the ACDS logo, name, fall meeting/exhibition artwork, or any representations thereof shall be only at the express written consent of show management. Canvassing or distribution of advertising material by an exhibitor is not permitted outside of the exhibitor's booth space. Third parties acting on behalf of or representing the exhibitor must adhere to and abide by ACDS rules and regulations.

### Food and Beverage Distribution

ACDS must be notified of an exhibitor's intent to distribute food or beverage items in the Exhibit area. All such items must be approved by ACDS and ordered directly from the Wyndham Philadelphia Historic District. Exhibitors are not permitted to bring in outside food or beverages.

### Subletting/Sharing of Space

Subletting of exhibit space is not permitted. No part of any exhibit space assigned to an exhibitor may be reassigned, sublet or shared with any other party by the exhibitor.

### Security

Security of products and materials is the responsibility of the exhibitors. ACDS nor the Wyndham Philadelphia Historic District, are not responsible for any loss or damage to exhibitor property.

### Non-Exhibiting Companies

Canvassing or marketing of any products or services in any part of the exhibit hall or meeting rooms by anyone representing a non-exhibiting firm is strictly prohibited.

### Cancellations

Exhibitor booth cancellations should be made in writing and sent to ACDS by July 24, 2021. No refunds are given for cancellations made after July 24, 2021.

### Interruption or Prevention of Exhibition

Each exhibiting company is responsible for obtaining business interruption and property damage insurance in such amounts as deemed appropriate to comply with its obligations hereunder and for its own protection.

### Liability

It is the responsibility of the exhibitor to have all licenses, permits, and/or registrations required by the venue, city, municipality and/or state. The exhibitor is responsible for compliance with all applicable tax laws.

## ACDS POLICIES

### Sanctions for Violations

ACDS reserves the right to reject for any reason any exhibit application submitted; to reject, prohibit or otherwise require modification of any exhibit for any reason that in its opinion is objectionable, may detract from the general character of the conference, and is not in keeping with the policies of ACDS. This reservation refers to companies, persons, products, and/or printed matter. ACDS may impose appropriate sanctions regarding current or future participation in ACDS exhibit programs. In the event of such restrictions or eviction, ACDS will not be liable for any refunds, rentals, or exhibit expenses.

### Privacy Information

The American Contact Dermatitis Society (ACDS) takes your privacy seriously. ACDS will only use your personal information to administer your exhibit booth at the 2021 ACDS Fall Meeting, to provide services that you have requested from ACDS and otherwise as you may expressly consent. A complete copy of ACDS's Privacy and Data Protection Policy, the terms of which are incorporated herein, can be found at <https://www.contactderm.org/privacy-policy>. By providing consent, you are allowing ACDS to process your personal data. ACDS will collect and store information you provide in the Exhibit Application for the purposes of reserving an exhibit booth at the Meeting, to assist with administrative planning and marketing purposes, and to allow the compilation and analysis of statistics relevant to ACDS.

The information you provide in the Exhibit Application and information provided at any other time during the Meeting, including without limitation any feedback obtained during the Meeting, will be used by ACDS to offer, provide and continue to improve its Fall Meeting and other services. With your permission, ACDS will disclose information that is collected in the Exhibit Application such as your name, organization, address, telephone and fax numbers, and email address for marketing purposes. ACDS will also use your email address to communicate important information regarding this event and for marketing purposes for future events. ACDS will not otherwise, without your consent, use or disclose your personal information for any purpose unless it would reasonably be expected that such a purpose is related to the offer, provision and improvement of the Fall Meeting or where such purpose is permitted or required by law.

**NOTE:** ACDS is photographing this Fall Meeting. These photographs, along with your name and/or likeness, may be used in ACDS publications or on the ACDS website. If you do not want your photo used, please inform the staff photographer at the time the photograph is taken.

# APPLICATION / CONTRACT FOR EXHIBIT SPACE

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Country: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Email: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

## PRODUCT DESCRIPTION (50 word limit)

Please submit with application.

## TABLE TOP EXHIBIT COST

6' table top exhibit space \$2,000 \_\_\_\_\_

Name on primary badges (complimentary):

1.) \_\_\_\_\_

2.) \_\_\_\_\_

Additional registrations \_\_\_\_\_ \$100 (each) \_\_\_\_\_

Name on additional badges:

1.) \_\_\_\_\_

2.) \_\_\_\_\_

3.) \_\_\_\_\_

## SPONSORSHIP OPPORTUNITIES

Support is separate from exhibit fee. Those contributing \$12,000 or more will receive priority in determining table location. Please see the accompanying meeting support and marketing opportunities for more information.

### General Meeting Support

Platinum Level	\$20,000 +	_____
Gold Level	\$15,000	_____
Silver Level	\$10,000	_____
Bronze Level	\$5,000	_____
Breakfast per day	\$8,000	_____
Breaks (AM or PM) per day	\$5,000	_____
Lunch per day	\$10,000	_____
Networking Social	\$12,000	_____
Mailing Labels	\$200	_____
Other		_____

I understand that if I reserve exhibit space and do not show to claim such space, the exhibit fee is not waived and is due and payable to the American Contact Dermatitis Society.

I agree to pay the total fee of \$2,000 U.S. dollars plus any additional registration or sponsorship fees by **July 24, 2021**. I agree to abide by all the regulations set forth in the accompanying prospectus which is made part of this contract, and to all conditions under which the exhibit space in the meeting hotel is leased to the American Contact Dermatitis Society. No refund of any payment will be allowed for voluntary cancellation after **July 24, 2021**.

In connection with your participation, please sign and return a copy of this agreement to acknowledge that you agree to hold our joint CME provider, the American Contact Dermatitis Society and the HOTEL harmless from any liability, damages, or costs (including reasonable attorneys' fees) that may arise as a result of you exhibiting at this CME activity. Without limiting the breadth of this hold harmless agreement, you acknowledge that it shall extend to include the loss, damage, or theft of any equipment or materials you bring to the conference site as well as injuries that any of your employees or agents may incur.

I acknowledge and agree to the hold harmless provisions set forth in this letter.

## PLEASE SIGNIFY YOUR ACCEPTANCE OF THESE GUIDELINES

I acknowledge the Exhibitor/Commercial Support Representative Guidelines as presented above and agree that I will abide by those guidelines.

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

Print Name: \_\_\_\_\_ Company Name: \_\_\_\_\_

## CREDIT CARD PAYMENT

THE SUPPORTER WISHES TO PROVIDE COMMERCIAL SUPPORT FOR  Exhibit Space  Support \_\_\_\_\_

Please charge to my  MasterCard  VISA  American Express  Discover

Name as it appears on your card (please print): \_\_\_\_\_

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

Signature of Card Holder (REQUIRED): \_\_\_\_\_

## PLEASE RETURN COMPLETED APPLICATION AND PAYMENT TO:

American Contact Dermatitis Society | 555 East Wells Street, Suite 1100 | Milwaukee, WI 53202

Phone: (414) 918-9805 | Fax: (414) 276-3349 | Email: info@contactderm.org