Oklahoma State University COLLEGE OF OSTEOPATHIC MEDICINE



CME Office 2019 Pain Management Symposium July 27, 2019 A B & Marylouise Tandy Medical Academic Building

A.R. & Marylouise Tandy Medical Academic Building Tulsa, OK

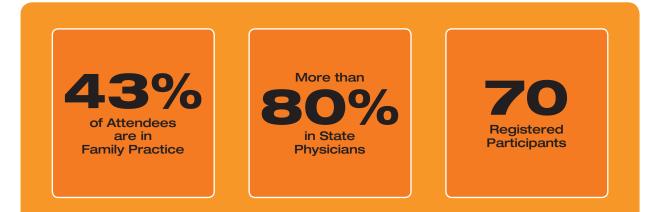


Center For Health Sciences

JOIN US!

The objective of the 2019 Pain Management Symposium is to enhance the knowledge of health care providers, thereby improving patient care. Participants in the 2019 Pain Management Symposium will become aware of new updates in Pain Management treatment and practice and gain a better understanding of the variety of patient types and conditions seen in the multiple patient care settings in urban and rural areas..

2018 Pain Management Symposium Statistics



Saturday, July 27 Schedule	
7:00 – 8:00 a.m.	Breakfast
8:00 a.m. – 12:15 p.m.	General Session
12:15 – 1:15 p.m.	Lunch
1:15 – 4:30 p.m.	General Session

Sponsorship Opportunities

- Signage on refreshment tables.
- Name listed as a sponsor in conference program.
- Logo listed on Digi-signs throughout conference venue.
- Logo on sponsor section on conference website.
- Featured in OSU-CME monthly newsletter.

- Breakfast Buffet \$750
- Lunch Buffet \$1,250
- Afternoon Break \$500
- **Charging Station \$500**

Sponsorship Application and Agreement

Oklahoma State University College of Osteopathic Medicine | Continuing Medical Education Office 2019 Pain Management Symposium, July 27, 2019 | A.R. & Marylouise Tandy Medical Academic Building –Tulsa, OK

Sponsorship Opportunities: (Please check all that apply)		
Breakfast Buffet: 🛛 \$750	Lunch Buffet: 🛛 \$1,250	
Afternoon Break: 🗅 \$500	Charging Station: 🛛 \$500	

Company Information (Please print) * If you would like your company logo used please provide in electronic form.

Contact Name:				
Company:				
Mailing Address:				
City:		State:	Zip:	
Cell/Office Phone:	()	E-mail:		
Names for exhibitor badge(s).				
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Sponsor Agreement

This application constitutes an understanding and agreement to comply with the OSU-COM sponsor guidelines as stated in this prospectus.

• The purpose of the program is educational and not promotional.

Name:	Company:
Signature:	Date:

Please keep a copy of this form for your files. Questions: 1-800-274-1972 or osu.cme@okstate.edu

Submit to: OSU-COM CME Office with form of payment and company logo in electronic form by July 12, 2019.

Fax: 918-561-1433

Mail: OSU-COM **CME Office** 1111 W. 17th St. Tulsa, OK 74107-1898

Sponsors will whot be reserved until signed application and payment are received. Cancellations made after July 19, 2019 will not be eligible for a refund.

Payment Information

Check #_____ in the amount of \$_____

Please make checks payable to OSU-COM ,
Federal Tax ID #73-1383996.

Credit card:	🗆 Visa	MasterCard	American Express	Discover
or oart oara.	u visa			

Amount: \$_____ Card number: _____ Exp. Date: _____ CVC:___