



California Association of Neurological Surgeons Exhibitor Registration and Confirmation January 14-16, 2011

Dear Exhibitor

Thank you for agreeing to exhibit at the CANS Annual Meeting January 15-16, 2011 in San Francisco.

SHIPPING/SET-UP/FLOOR PLAN (see page 2 for more details and floor plan)

All charges associated with shipping/receiving boxes/material and other special needs will be the responsibility of the individual vendor. Set-up begins at 8:00 p.m. Friday, January 14 in the Salon I Ballroom on the First Level. (There is a possibility that the room will be available earlier that evening but this will not be known until the time draws nearer.) Each vendor is required by the hotel to complete a credit card authorization form for the handling fees. Space will be assigned on a first-come basis. Upon your arrival, you will be given an envelope containing attendee list, name tags and other pertinent information. Exhibits can be taken down Sunday afternoon.

FRIDAY RECEPTION

You are invited to attend our opening reception (complimentary refreshments and no-host bar) Friday evening in the Terrace Courtyard Tent on the 2nd floor from 6:30-8:30 p.m. This reception is open to all neurosurgeons and vendors.

MEETING & EXHIBIT TIMES

Exhibit times are from 7:30-4:30 Saturday and 7:30-noon Sunday during the Electronic Health Records (EHR) session. Continental breakfast will be available Saturday and a brunch will be provided Sunday at no additional charge for up to two representatives.

HOTEL/AIRPORT

See page 5 for hotel room reservation information and note that the reservation deadline is **December 21, 2010**. Taxi service is approximately \$45 each way (airport to hotel); see page 5 for shuttle service information and driving directions.

SATURDAY BANQUET

CANS will hold its annual award reception and dinner on Saturday evening at 7:00 p.m. in The Dining Room on the Lobby Level. Dinner tickets (*menu on page 5*) must be purchased in advance (\$150). To confirm your dinner attendance, please return registration form (found on last page) by December 15, 2010.

SUNDAY BRUNCH

There will be a session on EHR (Electronic Health Records) Sunday morning with presentations by some of the EHR vendors who will host a brunch for all attendees. You are welcome to attend as most of you will still have your exhibits in place on Sunday morning.

RAFFLE

There will be a Saturday raffle, so if you would like to participate, please have your prize at your table. Each physician will drop a business card at your table and a drawing will be held during the last break on Saturday; physician must be present to win.

AGREEMENT

Please complete the last 2 pages and return them by either mail or fax to the CANS office as soon as possible.

FOR MORE INFORMATION

Janine Tash, California Association of Neurological Surgeons

5380 Elvas Avenue, Suite 216 Sacramento, CA 95819

Tel 916 457-2267

Fax 916 457-8202

janinetash@sbcglobal.net

www.cans1.org

updated 11-24-10

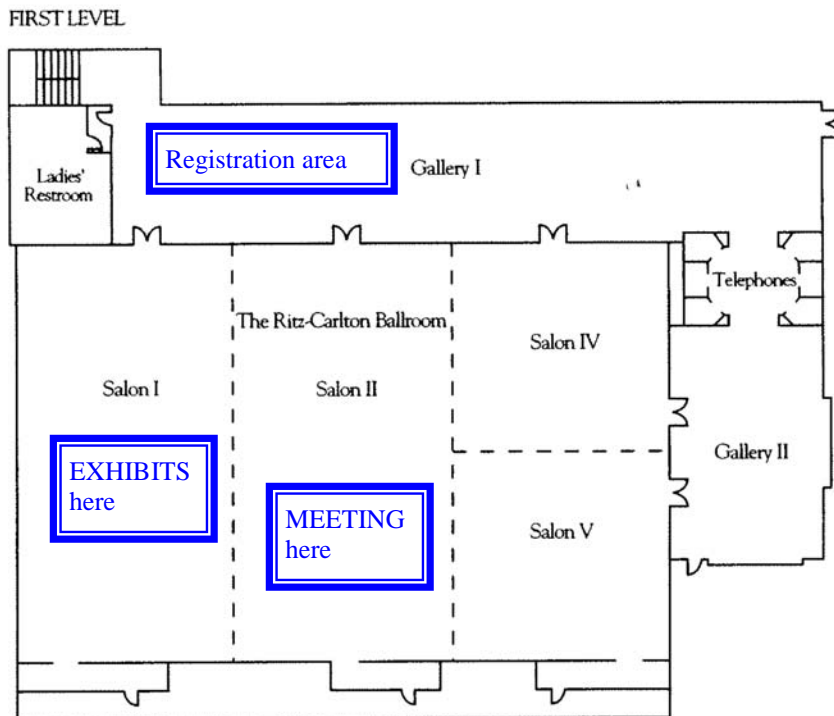


SHIPPING INSTRUCTIONS

Please address labels as shown below:

CANS: Jan 14-16, Salon I
c/o (your name) & Roy Weigel
600 Stockton Street
San Francisco, CA 94108
(1 of 3, 2 of 3, etc.)

- Shipments should be sent to arrive no more than 5 days prior to setup date. At the end of the conference, arrangements should be made to ship items no more than 3 days after teardown date. Storage charges will be applied to shipments held more than 3 days.
- The hotel will only release your boxes if the shipping charge form is completed and e-mailed back to them. All requests should be directed to **Roy Weigel, Event Concierge**, at roy.weigel@ritzcarlton.com.
- The authorization form can be found on the next page of this document.





EXHIBITOR CREDIT CARD AUTHORIZATION

**California Association of Neurological Surgeons
Date of Function: Friday, January 14, 2011 – Sunday, January 16, 2011**

EXHIBITOR NAME: _____

Address: _____

Phone: _____ Fax: _____

This letter authorizes The Ritz-Carlton, San Francisco to charge our company credit card or my personal credit card:

- There is a Box Handling Fee of \$5.00 per Item (Under 50 lbs) Incoming**
- There is a Box Handling Fee of \$5.00 per Item (Under 50 lbs) Outgoing**
- There is a Box Handling Fee of \$10.00 per Item (Over 50 lbs) Incoming**
- There is a Box Handling Fee of \$10.00 per Item (Over 50 lbs) Outgoing**

Credit Card Account Number: _____

Expiration Date: _____

Name As It Appears on the Card: _____

Company Name As It Appears on the Card: _____

Cardholder Signature: _____

Total Incoming Packages Received _____
Total Outgoing Packages Shipped _____

The estimated total balance of \$ _____ will be charged to your credit card on ____/____/____

Please See Roy Weigel, your Event Concierge With Any Questions or To Arrange Shipping And Handling. Your incoming packages will be held by the Event Concierge until payment is arranged.

Schedule of Events - January 14-16, 2011

FRIDAY

Welcoming Reception (Light refreshments/no-host bar), 6:30-8:30 p.m.

SATURDAY MORNING

7:30-8:15 **Continental Breakfast/Visit Exhibits**

7:50-8:10 **CANS Business Meeting**

Kenneth Ott M.D., President, California Association of Neurological Surgeons

THE FUTURE OF YOUR NEUROSURGICAL PRACTICE AFTER HEALTH CARE REFORM

8:30-9:20

The Impact of Federal Health Care Legislation on Hospitals and Neurosurgeons in California

C. Duane Dauner, President, California Hospital Association

9:20-10:10

New Models of Care under Health Care Reform

John Jenrette, MD, Chief Executive & Medical Officer, Sharp Community Medical Group, San Diego

10:10-10:40 break/visit exhibits

10:40-11:20

Federal and State Law: Its Effect on your Future Practice

Gary Spradling, Attorney, Duckor Spradling Metzger & Wynne

11:20-noon Panel Discussion

noon- 1:00 Luncheon/ Speaker

1:00-1:40

Locum Tenens, Duane Gainsburg, M.D., Weatherby Locums

1:40-2:20

Medical Device Distributorship Model, Angela Carlson, President, Alliance Surgical Distributors

2:20- 3:00

Gain Sharing with Hospitals, Matthew Cutler, CEO Select HealthCare Solutions

3:00-3:20 break/visit exhibits

3:20-4:00

Expert Witness Testimony, Rosalie Hamilton, Consultant, Expert Communications

4:00-4:40

The Challenge of the New Health Care Legislation to Academic Neurosurgery

Bob Carter, M.D., Chief of Neurosurgery, UCSD

** the last 10 minutes of each presentation will be reserved for discussion.*

SATURDAY EVENING BANQUET -

7:00p.m. Cocktails; 7:30 p.m. Dinner/Award Presentation to **Gerald D. Silverberg, M.D.**

SUNDAY

8:00-noon

Electronic Health Records—course and brunch



HOTEL RESERVATIONS

Reservations can be made by phone (800-241-3333) or via the link below:

<https://www.ritzcarlton.com/en/Properties/SanFrancisco/Reservations/Default.htm?gc=cnsensa&nr=1&ng=1>.

Reservations must be made by December 21, 2010 to receive the contracted group rate of \$225.00.

AIRPORT/HOTEL SHUTTLE

San Francisco Shuttle Service from SFO Airport

Claim your luggage (lower level). Proceed to the upper level and outside to the curb. Follow the SuperShuttle signs to get to the SFO Airport agent (in teal green jackets) and they will arrange your SuperShuttle transportation to your destination. You will wait for your van at Terminal 1 (across from Air Canada) or Terminal 3 across from United door #3. For charters/exclusives please call (800) BLUEVAN (258-3826) and select option 1. If calling from a cell phone (from other than a Bay Area number), select option 3. If you have a reservation for **Exclusive Van Service**, after claiming your luggage please contact us at 650-246-2797 and we will direct you to the proper boarding location. **\$17/one way**

San Francisco SFO Contact Info: (415) 558-8500, (650) 558-8500, (800) BLUE VAN (800-258-3826)

For a list of other shuttle services, log on to <http://www.sftravel.com/shuttl.html>.

DRIVING DIRECTIONS to the RITZ

FROM THE SOUTH: SF Airport/ Highway 101

Follow 101 North to Route 80 East (Towards the Bay Bridge); Exit at Fourth Street (This will place you on Bryant Street); Follow Bryant Street 1 block to 3rd Street and make a left; 3rd Street will cross Market Street and change names to Kearny Street; Follow Kearny Street 4 blocks to Pine Street and make a left
Take Pine Street 2 blocks to Stockton Street and make a right; the Hotel Driveway will be on your immediate right

FROM THE SOUTH: Route 280

Follow 280 until it ends on King Street; Stay on King until you reach 3rd Street and make a left; 3rd Street will cross Market and change to Kearny; Follow Kearny 4 blocks to Stockton and make a right; the Hotel will be on your immediate right

FROM THE EAST: Interstate 80 & SF/ Oakland Bay Bridge

Cross the Bay Bridge and stay in the right lane; Take the Fremont Street Exit; Turn left onto Fremont Street; Fremont will cross Market Street and change names to Front Street; Take Front Street 1 block to Pine Street and make a left; Take Pine 6 blocks to Stockton Street and make a right; the Hotel Driveway will be on your immediate right

FROM THE NORTH: Golden Gate Bridge/ Napa

Cross the Golden Gate Bridge; & take the Lombard Street / Downtown Exit; Follow Lombard to Van Ness Avenue and make a right; Follow Van Ness Avenue 1 mile to Bush Street and make a left; Follow Bush Street 9 blocks to Stockton Street and make a left; Follow Stockton Street 1 block to the Hotel; the Driveway will be on your right

DINNER MENU

(Saturday, January 15, 2011, 7:00 pm, The Dining Room on the Lobby Level)

Choice of Entree:

- (1) Georgian Bass, Ponzu Glaze, Lemon Grass Scented Rice, Roasted Shitakes
- (2) Grass Fed Prime Beef Tenderloin, Potato Puree, Seasonal Vegetables, Bordelaise
- (3) Farrotto (*similar to risotto*), Wild Mushrooms, Swiss Chard, Caramelized Onion

(salad, dessert and wine included)



CANS

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www.cans1.org

2011 Annual Meeting - AGREEMENT FOR EXHIBITS CALIFORNIA ASSOCIATION OF NEUROLOGICAL SURGEONS

This document sets forth the terms of the agreement between _____ (Exhibitor) and the **California Association of Neurological Surgeons (Association)** for the Association's Annual Meeting January 15-16, 2011 at the Ritz- Carlton Hotel in San Francisco, California.

REGISTRATION DEADLINE: December 1, 2010

1. **Booth Equipment and Space**

Each exhibit space will be provided with a 6' draped and skirted table and 2 chairs (electrical outlet by request). No walls, partitions, decorations or other obstructions may be erected which in any way will interfere with the view of another exhibitor. **Exhibitor is responsible for costs associated with the setup and transport of equipment/materials to and from the hotel.**

2. **Registration Fee**

Please remit a registration fee of **\$2000.00 per tabletop space.**

***If your company is interested in sponsoring travel and hotel for a resident or a prospective member, please remit an additional \$600 to cover these costs. Your company name and logo will be featured prominently in our program.**

3. **Hold Harmless Clause**

Exhibitor assumes entire responsibility and hereby agrees to protect, indemnify, defend and save the Association, the Hotel, and its employees and agents harmless against all claims, losses and damages to persons or property, government charges or fines and attorney fees arising out of or caused by Exhibitor's installation, removal, maintenance, occupancy or use of the exhibition premises or a part thereof, excluding any such liability caused by the sole negligence of the Hotel, its employees and agents.

In addition, Exhibitor acknowledges that the Association and Hotel do not maintain insurance coverage on Exhibitor's property and that it is the sole responsibility of Exhibitor to obtain business interruption and property damage insurance covering such losses by Exhibitor.

4. **Display Content**

The Association makes available display space to exhibitors to exhibit and demonstrate products and services used by neurosurgeons. Exhibits must have informational value and must be staffed by representatives qualified to explain products and answer questions.

5. **Contests, Lotteries, Raffles and the Promotion of Special Discount Offers.**

The Association will endorse raffles/drawings to promote interaction at each table by physicians. You are encouraged to participate and winners will need to be present to win.

6. **Modification of this Agreement**

This agreement may be modified only on the written consent of both Exhibitor and the Association.

7. **Agreement** The undersigned hereby agrees to the terms and conditions set forth above as well as any other terms and conditions necessary and incident to these requirements. (Please print clearly.)

Exhibitor (Full Company Name)

Address

City/State/Zip

Telephone

Fax

Contact Name

E-mail

Signature

Date

- ◆ **Will you require electricity to your space: Yes_____ No_____**
- ◆ **Names of your on-site representatives (to receive 2 complimentary brunch tickets on Sunday):**

- ◆ **Please include an additional \$150 per person for the Saturday banquet (menu on page 5):**
1st dinner: beef, fish or vegetarian 2nd dinner: beef, fish or vegetarian
additional dinners? _____
- ◆ **If you are participating in the raffle (page 1, item #5), please note what type of prize will be awarded so that these can be advertised in advance:** _____
- ◆ **Do you wish to sponsor a resident/prospective member for an additional \$600 (page 1, item #2)? Yes__ No__**
- ◆ **Provide a brief product description for the program book:** _____

- ◆ **Please provide a high-resolution copy of your company logo for the program booklet and subsequent newsletter.**

Total Payment due \$ _____

PAYMENT METHOD (please print clearly)

Check (payable to CANS)_____ **or** VISA or MasterCard_____

Card Number: _____ - _____ - _____ - _____ **Exp** _____

Name as it appears on card: _____

Address of cardholder: _____

For CANS use only

Date rec'd _____

Confirm. sent _____

Log ___ Pgm ___ NameTag ___

Payment Status:

Date of check _____

Check # _____ Amount _____

For credit cards:

Settled _____ Ledger _____

Cancellations: Before October 1, 2010 *full refund*; October 1, 2010 to December 1, 2010: *50% refund*; after December 1, 2010: *no refund*.