



THE AESTHETIC MEETING 2019

New Orleans Convention Center

www.surgery.org/meeting2019

EXHIBIT DATES: MAY 18 - MAY 20, 2019 MEETING DATES: MAY 16 - MAY 21, 2019

Industry Observer Registration Category American Society for Aesthetic Plastic Surgery

Who Qualifies: Individuals from companies looking to enter the aesthetic space and/or from investment/analyst firms with an interest in aesthetics.

Fee: \$3,500 per person / limited to two meetings for company representatives. Unlimited for representatives from investment/analyst firms. **Cancellation Policy:** Refund provided less 10% administrative fee. No Show onsite, no refund.

***Requirement:** Submission of a completed registration form accompanied by a letter verifying position/role within a company/investment firm on company letterhead.

What is included in the fee: Access to The Aesthetic Marketplace (exhibits), Scientific Sessions, and Presidential Welcome Reception. Access to Optional/Teaching Courses that are open to exhibit representatives, however, the course fee will apply and is based on availability starting 30 minutes before the course start time. For company representatives, you have the option to earn one booth point per Industry Observer badge to be used toward future meeting exhibit booth placement.

Expectations: No selling to attendees while attending the meeting. Participation is for observation/educational purposes only.

Small Print: ASAPs reserves the right to restrict attendance to our meetings. All requests to register as an Industry Observer is subject to an internal review and approval process.

Approval Process: All applicants for Industry Observer registration category will be subject to review by the Industry Exhibits Committee. Confirmation of meeting registration will be provided within 14 days.

First Name: _____ Last Name: _____

Company Name: _____

Badge Name (if different from above): _____

Street Address: _____

City: _____ State: _____

Zip/Postal Code: _____ Country: _____

Phone: _____ Fax: _____

Email: _____

Check here if, under the American Disabilities Act, you require specific aids or devices to fully participate in this meeting

Audio

Visual

Industry Observer* - requires confirmation letter (see above)

Total Enclosed: \$ 3,500.00

Payment

Check Payable to **ASAPS** (US Funds ONLY) is enclosed MasterCard Visa American Express

Account Number: _____

Expiration Date: _____ Security Code: _____ Billing Address Zip Code: _____

Card Holder Name: _____ Signature: _____

Submit Payment to: The Aesthetic Society (ASAPS) • 11262 Monarch Street, Garden Grove, CA 92841 USA

Fax: 562.799.1098 • Phone: 562.799.2356 • email: asaps@surgery.org