



P. O. Box 296 | Madison, MS 39130  
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2021 Hybrid Diabetes Symposium  
 IP Casino Resort Spa • Biloxi, MS  
 May 20 - 23, 2021

## EXHIBITOR AND SPONSORSHIP PROSPECTUS

The Mississippi Podiatric Medical Association will host its 2021 Diabetes Symposium Conference at the IP Casino Resort Spa, 850 Bayview Avenue, Biloxi, MS, May 20 - 23. The MsPMA Diabetes Symposium is comprised of podiatric physicians and medical professionals in the State of Mississippi and surrounding areas. Exhibitors and Sponsors will be provided an opportunity to increase your company's visibility and build solid business relationships with leaders and decision makers! **The MsPMA Expo' will open Thursday, May 20 through Saturday, May 22.**

Please e-mail Angela Weathersby, Executive Director and Conference Organizer at events@mspma.net should you have any questions regarding participating in the 2021 MsPMA Expo!

### EXHIBITOR AND SPONSORSHIP AGREEMENT

The Mississippi Podiatric Medical Association's 2021 Exhibit Hall will be on a first come, first service basis with priority given to Sponsors. Exhibit space and sponsorships sell out quickly, so we encourage you to register soon. Each table-top booth will consist of a skirted 6 ft. table and two chairs unless otherwise indicated. In addition to in-person participation, all exhibitors and sponsors will be given access to our virtual exhibit hall. More information regarding this process will be available on our website as we strive to make this conference as safe and beneficial to you as possible.

By registering, you agree to and understand the terms and conditions of participating in this event. Please complete this form and return by **April 1** to be included in the 2021 MsPMA Expo. Please note cancellations will not be accepted after this date (*please see cancellation policy*). We look forward to your participation.

Please complete the information below:

Company Name: \_\_\_\_\_ Contact Person: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone #: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_ Mobile #: \_\_\_\_\_

E-mail Address: \_\_\_\_\_ Badge Names: \_\_\_\_\_

In-Person Participation  Virtual Participation (*\*Please note the virtual attendance option is contingent upon the number of confirmed virtual registrations*) \_\_\_\_\_

Electricity Required?  Yes  No \_\_\_\_\_

Description of your company (25 words or less) \_\_\_\_\_

#### COVID 19 GUIDELINES

MsPMA will commit to COVID-19 precautionary measures throughout the duration of the 2021 Diabetes Symposium. Anyone exposed to or experiencing symptoms of COVID-19 ahead of the conference is requested not to attend in-person. Anyone concerned or in the high-risk category should consider attending virtually.

#### HOTEL INFORMATION




IP Casino · Resort · Spa | 850 Bayview Avenue | Biloxi, MS 39530 | www.ipbiloxi.com  
 For hotel room reservations: (888) 946-2847 | **Reservation deadline: April 26**  
 Mention MsPMA to receive group rate | Thurs \$79.99 Fri-Sat \$139.99

\* Please e-mail official ads and logos to [events@mspma.net](mailto:events@mspma.net) no later than April 1 or include with registration

- **Virtual Exhibit Only \$900** - Includes access to virtual exhibit hall during exhibit hours, listing in program book, signage, list of attendees.
- **Exhibitor Only \$1,200** - Includes table-top exhibit booth / two chairs, virtual exhibit hall access, listing in program book, signage, list of attendees, included in virtual exhibit hall.
- **Bronze Level Sponsor \$2,500** - Includes table-top exhibit booth / two chairs, virtual exhibit hall access, fourth-page ad in program book, signage, list of attendees, registration waived for one attendee.
- **Silver Level Sponsor \$3,500** - Includes table-top exhibit booth / two chairs, virtual exhibit hall access, half -page ad in program book, signage, list of attendees, registration waived for two attendees.
- **Gold Level Sponsor \$5,500** - Includes double table-top exhibit booth / two chairs, virtual exhibit hall access, full-page ad in program book, signage, list of attendees, logo and company information included in all conference communication, list of attendees, registration waived for two attendees.
- **Platinum Level Sponsor \$7,500** - Includes double table-top exhibit booth / two chairs, virtual exhibit hall access, full-page ad in program book, signage, list of attendees, registration waived for two attendees, logo and company information included in all conference communication, 5–7-minute presentation during keynote luncheon, customized promotion.

METHOD OF PAYMENT

- |   |   |
|---|---|
| <input type="checkbox"/> Virtual Exhibit Only   \$900   | <input type="checkbox"/> Silver Level Sponsor   \$3,500   |
| <input type="checkbox"/> Exhibitor Only   \$1,200       | <input type="checkbox"/> Gold Level Sponsor   \$5,500     |
| <input type="checkbox"/> Bronze Level Sponsor   \$2,500 | <input type="checkbox"/> Platinum Level Sponsor   \$7,500 |

<input type="checkbox"/>		Card Number: _____	Expiration Date: _____	CVV Code: _____
<input type="checkbox"/>		Cardholder Name: _____	Signature: _____	
<input type="checkbox"/>		Billing Address: _____		
<input type="checkbox"/>	Check	City: _____	State: _____	Zip: _____

Total amount authorized: \$ \_\_\_\_\_

Make checks payable to: **Mississippi Podiatric Medical Association | P.O. Box 296 | Madison, MS 39130**

**CANCELLATION POLICY:** Cancellations made after March 1 will be subject to a 50% charge and must be requested in writing. Cancellations will not be accepted after April 1. Please e-mail [events@mspma.net](mailto:events@mspma.net) with any questions.



**2021**  
**DIABETES**  
**SYMPOSIUM**  
Biloxi, MS

## EXPO SHIPPING & STORAGE

The Mississippi Podiatric Medical Association will not be responsible for accepting exhibit shipments for storage. Exhibitors are responsible for planning delivery and return shipments directly with the IP Casino Resort Spa. Materials will be accepted based on prior authorization from Convention Services Coordinator. Materials and packages must be labeled as follows:

**Exhibitor/Sponsor Company Name and Representative  
Group Name: Mississippi Podiatric Medical Association  
Arrival Date: May 20, 2021  
IP Casino and Spa  
850 Bayview Avenue  
Biloxi, MS 39530**

## EXPO BUILDING OCCUPANCY AND SECURITY

In the event the premises of the IP Casino Resort Spa are destroyed or damaged, or if the convention fails to take place as scheduled or is interrupted and/or discontinued, or access to the premises is prevented or interfered with by reason of any strike, lockout, injunction, act of war, act of God, emergency declared by any governmental agency or IP Casino Resort Spa, or for any other reason, this contract may be terminated by the Mississippi Podiatric Medical Association.

The exhibit hall will be locked during off hours. However, each exhibitor/sponsor must make provisions for safeguarding goods, materials, equipment, and display at all times. MsPMA and IP Casino Resort Spa WILL NOT be responsible for the loss of any exhibit materials by or for any cause.

## EXPO SCHEDULE AND HOURS

Reserved exhibit hall hours are listed below. Educational sessions will not take place during the times allocated to give meeting attendees opportunities to explore the exhibit hall in-person and virtually. Please note that the exhibit hall will be open at all times during the meeting. The virtual booths will remain active for three months after the meeting ends.

<b>Thursday, May 20</b>			
<b>Start time</b>	<b>End time</b>	<b>Function</b>	<b>Location</b>
3:00 pm	5:00 pm	Set-up	Ballroom D
6:00 pm	7:00 pm	Welcome Reception & Exhibitor Showcase	Ballroom D
<b>Friday, May 21</b>			
7:00 am	9:30 am	Set-up	Ballroom D
9:30 am	10:00 am	Expo Hall Open	Ballroom D
12:00 noon	1:30 pm	Lunch ( <i>please join us</i> )	Ballroom H
2:30 pm	3:00 pm	Expo Hall Open	Ballroom D
<b>Saturday, May 22</b>			
7:00 am	9:45 am	Set-up	Ballroom D
9:45 am	10:45 am	Expo Hall Open	Ballroom D
11:00 am	12:00 noon	Dismantle	Ballroom D

MISSISSIPPI PODIATRIC  
MEDICAL ASSOCIATION



**2021**  
**DIABETES**  
**SYMPOSIUM**  
Biloxi, MS

## Request for Taxpayer Identification Number and Certification

**Give Form to the  
requester. Do not  
send to the IRS.**

▶ Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

Print or type.  
See Specific Instructions on page 3.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. <b>Mississippi Podiatric Medical Association</b>	
2 Business name/disregarded entity name, if different from above	
3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only <b>one</b> of the following seven boxes.  <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate  <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____ <b>Note:</b> Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is <b>not</b> disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.  <input checked="" type="checkbox"/> Other (see instructions) ▶ <b>Non-Profit</b>	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):  Exempt payee code (if any) _____  Exemption from FATCA reporting code (if any) _____  <small>(Applies to accounts maintained outside the U.S.)</small>
5 Address (number, street, and apt. or suite no.) See instructions. <b>999 North Halstead</b>	Requester's name and address (optional)
6 City, state, and ZIP code <b>Ocean Springs, MS 39564</b>	
7 List account number(s) here (optional)	

### Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

**Note:** If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

<b>Social security number</b>									
		-		-					
<b>OR</b>									
<b>Employer identification number</b>									
8	3	-	2	5	7	7	2	6	5

### Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

<b>Sign Here</b>	Signature of U.S. person ▶	Date ▶ 1/2/21
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### General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

**Future developments.** For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9).

#### Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (Interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)  
Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.  
*If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.*