

AESTHETIC EXTENDER SYMPOSIUM

EXCELLENCE IN TRAINING

Affiliate Meetings

Affiliate meetings held in conjunction with the Aesthetic Extender Symposium are valuable opportunities to reach a more targeted audience in the Dermatology and Aesthetic Medicine community. The affiliate meetings can consist of trainings, injectable courses and beginner or advanced classes. These activities are not sponsored by AES and should run independently of AES. All times and dates are subject to availability and will be assigned by the AES.

Included in Fee:

- Meeting room to accommodate up to 15-20 people.
- Full or half-day time slot for affiliate meeting (*prices vary depending on length of time and are charged per day*)
- Assistance with promoting the affiliate meeting through e-blasts and social media

PLEASE NOTE: Food and beverage, audiovisual equipment, honorarium and any other out of pocket expenses are the responsibility of the supporter. AES will put you in touch with the hotel and preferred audiovisual vendor.

Contact:

Jennifer Bechan

Phone: 904-309-6206

Fax: 904-425-4230

jbechan@aestheticextendersymposium.com

Requirement:

A company must sponsor at the Bronze level (\$5,000) or higher in order to hold an affiliate meeting. Please see the exhibit and sponsorship prospectus for more details on the Bronze sponsorship and benefits included.

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AFFILIATE MEETING APPLICATION

COMPANY CONTACT INFORMATION:

Contact: _____

Company Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Cell Phone: _____

E Mail Address: _____

TOPIC BEING DISCUSSED: _____

FEES AND PAYMENT INFORMATION:

Full Day Time Slot: \$1,000 (per day)

Half Day Time Slot: \$750 (per day)

FULL PAYMENT REQUIRED UPON APPLICATION:

Check: I will pay with check*

*Please make checks out to ***Aesthetic Extender Symposium***

Card Type: MasterCard American Express VISA

Credit Card #: _____ Expires: _____

Security Code: _____

Name on credit card: *(Please Print)* _____

Credit Card Billing Address: _____

*I understand that AES will be charging my card for this fee:

Signature: _____ Date: _____