



**Canadian Laser and Aesthetic
Specialists Society**

**ANNUAL
EDUCATIONAL SYMPOSIUM
EXHIBITOR PROSPECTUS**

Saturday, November 11, 2017



TORONTO
Shangri-La Hotel



CANADIAN LASER AND AESTHETIC SPECIALISTS SOCIETY

2334 Heska Rd., Pickering, Ontario L1V 2P9

Tel: 905-837-1124 / 1-877-578-0336

Fax: 905-837-1125

E-mail: info@class.ca

Web site: www.class.ca

EDUCATIONAL SYMPOSIUM

Saturday, November 11th, 2017

EXHIBITOR INFORMATION

- Venue:** Shangri-La Hotel, Toronto – Queen’s Park Ballroom
- Exhibit space:** Table Top Exhibits - 6 ‘ draped table provided..
- Booth Allocation:** Tables will be spaced around the perimeter of the room with coffee and lunch service provided in the centre of the room. Preferred exhibit space will be delegated with priority dependent on the level of sponsorship and thereafter on a first-come, first- served basis. On receipt of registration and full payment, a floor plan will be sent to exhibitors to indicate 1st, 2nd and 3rd choice.
- Hotel Info:** Shangri-La Hotel 188 University Ave. Toronto, ON .
Room rate: **\$325.00** per night. Cut off date: **October 12, 2017**
Reservations: Hotel Main 647-788-8850 / groups.slto@shangri-la.com
(Reference CLASS Mtg)
- Set-Up time:** **Saturday November 11th 6:00 a.m. – 9:00 a.m.**
- Exhibit Hours:** Saturday, November 11th 9:30 a.m. – 4:00 p.m.
Cocktail reception 5:00 p.m. – 6:00 p.m.
- Hotel Contact** **Conference Service Manager: Nancy Kornechook**
Tel: (647) 788-8880 E-Mail: nancy.kornechook@shangri-la.com
- Electrical/ AV** Simon Benevides- PSAV
sbenevides@psav.com / tel: 647 892 6232.
- Shipping :** Please direct all deliveries to 180 University Avenue via Simcoe Street, Loading Bay - Simcoe Entrance. Deliveries to 3rd Floor.

NO MORE THAN 2 DAYS IN ADVANCE

All packages are required to be addressed to
Ms Pat Hewitt c/o
Ms Nancy Kornechook: Class Meeting 2017 (11.09.17 - 11.12.17)
QUEENS PARK ROOM
NUMBER OF PACKAGES (1 of 3, 2 of 3, etc).

Kindly note, any deliveries greater than eight (8) boxes will require a time to be scheduled for bay access. All large/heavy deliveries requiring a pallet truck will require a delivery truck with a lift.

CLASS ANNUAL SYMPOSIUM 2017

REGISTRATION FEE

	Before Oct. 11/17	After Oct.11/17
CORPORATE MEMBER	\$1500.00 (INCLUDES 2 REPS)	\$1600.00
CORPORATE NON-MEMBER	\$2000.00 (INCLUDES 2 REPS)	\$2100.00
Extra representatives	\$ 125.00 each	

SPONSORSHIP OPPORTUNITIES

All sponsorships will be acknowledged in the meeting program and have additional meeting signage.

BREAKFAST	\$1000.00
LUNCH	\$2500.00
COCKTAIL RECEPTION	\$2000.00
DELEGATE BAGS	\$1000.00

In addition, sponsorships in the form of unrestricted Educational Grants will also be accepted. Companies sponsoring at these levels will also have acknowledgement on the CLASS home web page and meeting program, additional signage in meeting venue, and will have preferred exhibit space dependent on the level of sponsorship. PLUS level sponsors will have complimentary exhibit space .

\$10,000.00	Platinum PLUS Sponsorship 2 hour Satellite Symposium and 2 exhibit spaces
\$ 6000.00	Gold PLUS sponsorship 1 hour Satellite Symposium and 1 exhibit space
\$ 5,000.00	Platinum Sponsorship
\$ 3,500.00	Gold Sponsorship
\$ 2,500.00	Silver Sponsorship

Exhibit Registration Fee _____ + GST 13% on exhibit fee only

Sponsorship _____

Total Due _____

Payment by: VISA CHEQUE payable to CLASS

Credit Card Number _____ Exp. Date _____

Signature of cardholder _____

Company Name: _____

Contact Person _____

Address: _____

City: _____ Province: _____ Postal Code _____

Telephone: _____ Fax: : _____ E-Mail: _____

Representatives: _____

Please return by mail or fax to:

CLASS - 2334 Heska Rd. Pickering, Ontario L1V 2P9

Tel: 905-837-1124 / 1-877-578-0336 Fax: 905-837-1125

CLASS Platinum PLUS and Gold PLUS Sponsorship Satellite Meeting Request

NOTE: The Platinum PLUS and Gold PLUS Sponsorship Satellite Meeting Request requires approval of a majority of the CLASS Board of Directors. Upon approval, this meeting package includes the following items:

1. Minimum of Three Advertising email announcements to our entire contact list of 600+ aesthetic procedure oriented specialist practices in Canada (Plastic Surgeons, Facial Plastic Surgeons, Dermatologists, Oculoplastic Surgeons), including sponsor provided wording announcement and colour logo.
2. All mailouts are to be handled by CLASS staff with content provided by Sponsor. Email will be professionally designed by our web marketing provider optimized for viewing on computers as well as smart phones and tablets, with a SAFE UNSUBSCRIBE feature
3. Inclusion of Company Logo and Satellite meeting announcement on official CLASS website home page with internal link to professionally designed Satellite meeting announcement webpage including Company logo within CLASS official website on separate page within official website
4. External Link out from official CLASS website to Sponsor's company website of sponsor's choice (with page indicating that browser is leaving official CLASS website)
5. Prominent signage and Logo displayed at meeting indicating sponsorship level.
6. Hotel meeting room provided for holding satellite meeting at no extra charge, including registration services with official badges for attendees.
7. Advertising announcement including Company logo of satellite meeting on our official CLASS registration form.

Space will be sold on a first-come, first-served basis.

CLASS is not responsible for the overall outcome or attendance of the symposium.

The views expressed and quality of content are those of the commercial sponsor and should not be regarded as those of CLASS, its board, members or staff. Any advertising that sent out by the commercial sponsor may NOT state that the symposium is ENDORSED by CLASS but may state: "Held during the CLASS 2017 Annual Meeting"

The undersigned agrees and acknowledges the terms of the application.

Name: _____ **Title:** _____

Signature: _____ **Date:** _____

Please send completed application and payment to:

**CLASS
2334 Heska Rd.
Pickering, ON L1V 2P9
Tel: 905-837-1124/ Fax: 905-837-1125**

CLASS MEETING 2017
Corporate Satellite Symposium Space Request

Company Name: _____

Event Organizer/Contact: _____

E-Mail: _____

Telephone: _____ **Fax:** _____

Address: _____

Website: _____

Event Title _____

Estimated Attendance: _____

Date/Time Requested:

- | | | | | |
|--------------------------|--|--------------------|--------------------------------|-------------------|
| <input type="checkbox"/> | Friday, November 10th
6-7 p.m. | \$6,000.00 | Saturday, November 11th | \$6,000.00 |
| | | | 7-8 a.m | |
| <input type="checkbox"/> | Friday, November 10th
7-8 p.m. | \$6,000.00 | | |
| <input type="checkbox"/> | Friday, November 10th
6-8 p.m. | \$10,000.00 | | |

Room Set up: **Rounds** **Theatre** **Crescents** **Schoolroom**