

Eastern Shore Medical Symposium



Exhibitor Prospectus

49th Annual Eastern Shore Medical Symposium

June 22-26, 2026

Rehoboth Beach Convention Center

Rehoboth Beach, DE

49th Annual Eastern Shore Medical Symposium

Monday- Friday, June 22-26, 2026

Symposium Location	Rehoboth Beach Convention Center 229 Rehoboth Avenue Rehoboth Beach, Delaware 19971								
Exhibit Times	<p><u>Representatives may begin exhibiting at 7:00AM on Monday, June 22, 2026.</u></p> <p>All Exhibits are available throughout the conference. The following preliminary times are dedicated exhibit times where food and beverage is served: All week, Monday through Friday!</p> <p>Preliminary Agenda - Subject to Change</p> <table> <tr> <td>7:00 AM- 7:55 AM</td><td>Registration, Breakfast & Exhibits</td></tr> <tr> <td>9:40 AM - 10:00 AM</td><td>Break & Exhibits (Mon-Thurs)</td></tr> <tr> <td>9:10AM - 9:30AM</td><td>Break & Exhibits (Friday)</td></tr> <tr> <td>12:30 PM -12:45PM</td><td>Exhibitor Networking</td></tr> </table> <p>*Exhibitors will be in a separate area from the education meeting space</p>	7:00 AM- 7:55 AM	Registration, Breakfast & Exhibits	9:40 AM - 10:00 AM	Break & Exhibits (Mon-Thurs)	9:10AM - 9:30AM	Break & Exhibits (Friday)	12:30 PM -12:45PM	Exhibitor Networking
7:00 AM- 7:55 AM	Registration, Breakfast & Exhibits								
9:40 AM - 10:00 AM	Break & Exhibits (Mon-Thurs)								
9:10AM - 9:30AM	Break & Exhibits (Friday)								
12:30 PM -12:45PM	Exhibitor Networking								
Exhibitor Registration	https://jefferson.cloud-cme.com/ESMS2026 Select EXHIBITOR TAB . Please submit it by June 15, 2026.								
Setup & Breakdown	Exhibit Set-up can begin on Monday, June 22, 2026, at 6:00AM. Exhibit breakdown must be completed by 11:00am, June 26, 2026.								
Electrical Needs	Please email your electrical needs for your exhibit booth to Jennifer Turner at jennifer.turner@jefferson.edu by June 15, 2026. <i>Additional fees may apply.</i>								
Payment	<p>Please make check payable to: Thomas Jefferson University Note Course ID 44947</p> <p>Mail to: Thomas Jefferson University Office of CPD 1020 Locust Street Suite M5 Philadelphia, PA 19107</p> <p>American Express, Visa and MasterCard are also accepted via the registration portal.</p> <p>https://jefferson.cloud-cme.com/ESMS2026 Select EXHIBITOR TAB</p> <p>Tax ID: 23-135-2651</p>								
Shipping	<p>Shipments will be accepted by the Rehoboth Beach Convention Center 2 days prior to the conference, no earlier than Friday, June 19, 2026. Be sure to label accordingly.</p> <p>Label for Boxes: Rehoboth Beach Convention Center 229 Rehoboth Avenue Rehoboth Beach, Delaware 19971 Attn: Exhibitor Name/Company Attn: 49th Annual Eastern Shore Medical Symposium Box ____ of ____</p> <p>Please email Jennifer.Turner@jefferson.edu with the following information: name of sender, how many boxes, when you are shipping them, and when shipment is expected to arrive at Rehoboth Beach Convention Center.</p> <p>Rehoboth Beach Convention Center, the Office of CPD, and SKMC/TJU do not accept any liability for equipment, goods, displays, or other materials, which arrive unmarked or fail to arrive at the conference location. Each exhibiting company is responsible for insuring its property for loss or damage. <i>Please note that all company representatives are solely responsible for packaging, labeling, and coordinating return shipping at the conclusion of the conference with Rehoboth Beach Convention Center.</i></p>								

Accommodations	<p>Please make hotel reservations as soon as possible, as room blocks fill quickly! For a list of accommodations with discounted rates, please visit:</p> <p>https://jefferson.cloud-cme.com/ESMS2026</p>
Exhibit Rules	<p>All in person exhibits must be tabletop or portable in nature not to exceed 6ft in width. Each in person exhibit company will be provided a 6' x 30" table and chairs. Each exhibitor will be listed in the course exhibit directory, in the administrative slideshow and on conference posters.</p> <p>PLEASE NOTE: We will not be allowing multiple reps to switch out throughout the day. This policy will be enforced.</p> <p>Exhibitors acknowledge that:</p> <ul style="list-style-type: none"> • Exhibitor is not furnishing commercial support for this conference. Exhibitor is buying virtual or in person exhibit space. • Exhibitor activities are restricted to the allocated physical or virtual exhibit space at the conference. Distribution of educational/promotional materials by exhibitors is limited to their booth space in the exhibit area. It is not permitted anywhere else in the hall, in the conference meeting space, or at the entrances to the conference meeting space. • Advertisements and promotional materials will not be visible on the screen at the same time as the accredited content and not interleaved between computer windows or screens of the accredited content. • Advertising of any type is prohibited within the educational content. • Audio and Video: Advertisements and promotional materials will not be included within the accredited content. There will be no commercial breaks. • Exhibits are intended for informational purposes. Products may not be sold in the virtual exhibit hall. • The recording (photographic, screen capture, audio and/or video) of the conference and/or its attendees is prohibited. • The purpose of the exhibit is to further the education of meeting attendees through product and service displays and demonstrations. Exhibitor personnel may observe should the conference space allow but must refrain from any participation or recording of any scientific sessions on that company's behalf. • The conference is not responsible for the security of exhibitors' materials. We suggest that exhibitors leave nothing of value (e.g., laptop computer, audio visual equipment, etc.) unattended at any time in the exhibit hall. • By registering, they agree to pay the applicable exhibit fees.
Sunshine Act	<p>The Parties acknowledge and agree that Exhibiting Company may be subject to Section 6002 of the Affordable Care Act, which added Section 1128G to the Social Security Act, and its implementing regulations codified in 42 CFR 402 & 403 (collectively the "Sunshine Act").</p> <p>Exhibiting companies are solely responsible for collecting any information about actions within their exhibit space that constitutes a payment or transfer of value to a Covered Recipient that is required to be reported under the Sunshine Act.</p>
Cancellation by Symposium Organizers	<p>In the event that the conference is cancelled, the organizers are not responsible for airfare, hotel, and/or other costs incurred by exhibitors. Refunds will be provided for exhibit fees.</p>
Refund Policy	<p>Requests for exhibitor fee refunds must be submitted in writing and received by the Office of CPD before May 22, 2026. There will be no refunds after this period. Cancellations notified before the one-month period will incur a 15% cancellation fee. Exhibitors who fail to attend the conference are responsible for the entire fee. All refunds will be processed after the conference.</p> <p>Submit refund requests to Jennifer.Turner@jefferson.edu - please include the activity name in the subject line.</p>
Questions	<p>Please contact <i>Jennifer Turner</i> at Jennifer.Turner@jefferson.edu</p>

Exhibit Options, Product Theater, & Enhancements

All exhibits must be tabletop or portable in nature not to exceed 6ft in width.

All assets due May 22, 2026

Exhibit Table \$3,500 (Full week)	<p>Showcase your products and connect with attendees all week!</p> <ul style="list-style-type: none">• Up to two company representatives• Acknowledgement in course materials• Consent to Share Attendee List• One 6-foot draped table
Product Theater \$5,000	<p>PRODUCT THEATER (LIMITED TO ONE COMPANY PER SESSION)</p> <p>Thursday Session: June 25, 2026, 7:15AM-7:45AM \$5,000.00</p> <p>Product theaters provide a focused, high-value live marketing opportunity for exhibitors to reach motivated professionals in a pre-scheduled, private session. Product Theaters provide a forum to gather and discuss issues on patient education, specific products and therapeutic areas with company representatives or your designee.</p> <p>Jefferson Office of CPD recognizes that Product Theaters will be promotional and may concentrate on a specific product or drug. These sessions are not approved for continuing education credits. This is a live, in-person opportunity where basic AV set-up of a screen; projector and microphone will be provided. Any additional AV requirements will be at the expense of your company.</p> <ul style="list-style-type: none">• This opportunity is limited to a 30-minute session. Due to space constraints, they will be capped at 50 attendees per session.• Companies may provide a 1-page digital flyer that will be provided to attendees ahead of the conference.• Companies may provide a printed information flyer that will be distributed on the day of the program at the registration area.–– <p>Sponsor must provide Company Representative Name, Title of Session (up to 8 words), Short Description of Session (up to 15 words) and Extended Description of Discussion (up to 60 words), flyer and company logo.</p> <p>No portion of this fee will be used for food and beverages. The conference will supply food and beverages to the attendees, and they can bring it to the product theater to eat during the product theater presentation should they wish.</p> <p>*Product Theaters are open to the first company that registers and pays. We cannot guarantee any slot until your registration is completed.</p>
Sponsorship \$2,000	<p>Sponsor breakfast and receive acknowledgment in course materials.</p>

**Request for Taxpayer
Identification Number and Certification**

Go to www.irs.gov/FormW9 for instructions and the latest information.

Give form to the
requester. Do not
send to the IRS.

Before you begin. For guidance related to the purpose of Form W-9, see *Purpose of Form*, below.

Print or type. See Specific Instructions on page 3.	1 Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.) THOMAS JEFFERSON UNIVERSITY	
	2 Business name/disregarded entity name, if different from above.	
	3a Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only one of the following seven boxes. <input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> C corporation <input type="checkbox"/> S corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner. <input checked="" type="checkbox"/> Other (see instructions) NON-FOR-PROFIT 501C3	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) 1 Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any) A <i>(Applies to accounts maintained outside the United States.)</i>
	3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions <input type="checkbox"/>	
	5 Address (number, street, and apt. or suite no.). See instructions. 1101 MARKET STREET, SUITE 2004	6 City, state, and ZIP code PHILADELPHIA, PA 19107
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. See also *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number								
				-				
or								
Employer identification number								
2	3			-	1	3	5	2 6 5 1

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.

Sign Here	Signature of U.S. person 	Date 03/31/2025
------------------	--	------------------------

Yevgeniy Shcherbakov, Acct. Manager

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.

What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they