

**Women's and Infants' Health Symposium:
Medical Management Today for Healthy Living Tomorrow**

May 12–13, 2011 • Chicago, Illinois

Exhibiting & Registration Information

Exhibiting Fee

Exhibit space includes one skirted 6' or 8' table during the Get-Acquainted Reception. For fee information, refer to your conference support agreement or letter of invitation to exhibit.

Exhibit Space Application

Review and complete the Application for Exhibit Space and Indemnification Agreement in its entirety. Return the signed form to OptumHealth at least 30 days prior to the start of the conference.

Exhibitor Registration

Register online at

<http://www.optumhealtheducation.com/women-infants/>

All individuals at the exhibition and conference must register through the conference Web site. Exhibiting staff may register at no charge. Complete the online registration to identify your Exhibiting Assistant(s) using the Exhibit Staff registration category.

Exhibit Date and Hours

Thursday, May 12.....5:30 to 7 p.m.

Food and refreshments will be served during the reception.

Exhibiting Requirements

Exhibit Setup and Dismantle. Exhibitors are responsible for set up and tear down of their display. Displays can be assembled two hours prior to the start of the reception, and must be dismantled within one hour after the close of the reception.

Staffing. It is requested the exhibit be staffed throughout the open exhibit time.

Special Needs. Exhibitor is responsible for any special requirements, such as electrical and audiovisual equipment. Contact LuAnne Ronning for ordering information.

Exhibit Materials. All signs, displays and handouts are solely the responsibility of the Exhibitor. OptumHealth and Swissôtel Chicago are not responsible for the security of items in the exhibit area.

Shipping

Shipping. Shipping of materials to and from the hotel is the responsibility of the Exhibitor. Packages will be accepted by the hotel up to 7 days prior to the conference. An extra labor or storage fee may apply. To ensure proper delivery, include the following information on your packages:

OptumHealth Women's Health Conference
Jennifer O'Brien, Conference Svcs Mgr
Swissôtel Chicago
323 E. Wacker Drive
Chicago, IL 60601

Hold For: Exhibitor's Name/Organization & Phone Number
Arrival Date: 03/12/11

Hotel Information

Hotel: Swissôtel Chicago, 323 E. Wacker Drive,
Chicago, IL 60601

Phone: (888) 737-9477

Rate: \$239.00 single/double. Mention OptumHealth Women's Health Conference to receive this special rate.

Room Block Release Date: April 15, 2011

Cancellations

If your company must cancel, prompt notification to the Exhibit Manager is requested.

Right of Refusal

OptumHealth reserves the right to refuse conference registration, attendance and exhibitor applications.

Contact Information

Exhibit Manager: LuAnne Ronning
Phone: (218) 834-6369
Fax: (414) 208-2656
E-mail: luanne.ronning@optumhealth.com

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Exhibit Space Application

EXHIBITOR INFORMATION: (please type or print clearly)

Exhibiting Organization: _____

Exhibitor Contact Name: _____
(Company representative to receive all information regarding exhibits and the conference.)

Title: _____

Mailing Address: _____

City, State, Zip Code: _____

Phone: _____ **E-mail (required):** _____

List any probable Exhibitors you DO NOT wish to be near: _____

PAYMENT INFORMATION:

Exhibit Fee: **OptumHealth Sponsor/Supporter** \$ _____
(Refer to your letter of invitation for exhibit fee information.)

Other \$ _____
(Refer to your letter of invitation for exhibit fee information.)

Method of Payment: **Check payable to: OptumHealth Education**
Federal Tax ID: 30-0238641

Check Enclosed *(Payment is required for booth assignment.)*

Visa **MasterCard** **American Express**

Credit Card # _____ **Exp.** _____

Print Cardholder's Name _____ **Signature** _____

PROMOTIONAL INFORMATION:

Organization Name for Conference Materials:

(Use upper and lower case letters exactly as you want your organization's name to appear in conference materials and signage.)

INSTRUCTIONS:

Instructions (refer to the Exhibiting Information sheet for fee information and exhibiting details):

(1) **Application:** Complete this form to apply for exhibit space during the Get-Acquainted Reception. Submit the completed form at least twenty-one days prior to the start of the conference.

(2) **Registration:** All on-site representatives from your organization must register.

(3) **Right of Refusal:** OptumHealth reserves the right to determine eligibility of any applicant as an Exhibitor.

By signing this form, you agree: The Exhibitor assumes all responsibility for any and all loss, theft, or damage to exhibitor's displays, equipment and other property while on Swissôtel Chicago premises, and hereby waives any claim or demand it may have against UnitedHealth Group or on Swissôtel Chicago or its affiliates, arising from such loss, theft, or damage.

In addition, the Exhibitor acknowledges that UnitedHealth Group does not maintain insurance covering Exhibitor's property. It is the sole responsibility of the Exhibitor to obtain appropriate insurance covering any losses by the Exhibitor.

You also agree to comply with any instructions or other terms contained in other materials delivered to you concerning this exhibit.

Authorized Signature: _____ **Date:** _____

Application Due Date: April 11, 2011

FAX your application to (414) 208-2656

For more information contact:

Exhibit Manager: LuAnne Ronning

Phone: (218) 834-6369

E-mail: luanne.ronning@optumhealth.com

MAIL to: Bethany Blauer

6300 Olson Memorial Highway, MN010-S157

OptumHealth Care Solutions

Minneapolis, MN 55440-9472

OR

E-MAIL to: luanne.ronning@optumhealth.com

Go to www.optumhealth/conferences
for conference information and registration.