

ISC 2014

DON'T MISS an opportunity to be a part of this gathering of influential physicians, scientists and researchers who are committed to the latest developments in cardiovascular disease and stroke.

INTERNATIONAL STROKE CONFERENCE 2014

Feb. 12 – 14, 2014 • San Diego, CA

Exhibit Hall dates & hours
Wednesday, Feb. 12 – Thursday Feb. 13

Exhibit Space Rates
Priority Rate (before June 28): **\$30/sq. ft.**
Beginning July 1: **\$33/sq. ft.**

Priority Assignments: July 1, 2013

WHO ATTENDS

Attendance By Category

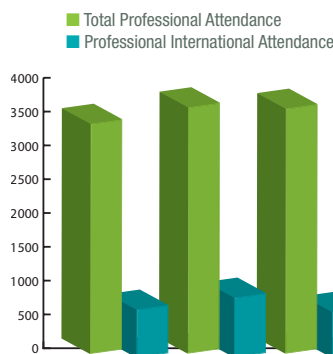
Professional Attendees

Year	2010	2011	2012
Physician	1,702	1,984	1,747
Research Scientist	335	392	357
Physician Assistant	15	17	30
Pharmacist	30	39	28
Physical Therapist	15	17	30
Occupational Therapist	2	7	15
Nurse	807	764	896
Nurse Practitioner	92	86	62
CPHQ	24	15	19
Non-Healthcare Professional	178	152	158
Administrator	86	96	118
EMT/Paramedic	8	8	7
Other Healthcare Professional	182	157	245
Technician	53	42	47
Total Professionals	3,532	3,781	3,760

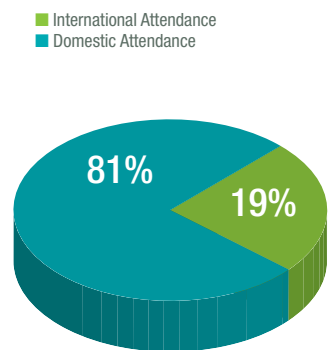
Other Attendees

Year	2010	2011	2012
Exhibitors	416	449	388
Spouse/ Exhibits Only	42	58	63
AHA Staff/Suppliers	155	151	213
Press/Media	47	41	34
Total Other	660	81	698
Total Professionals	4,192	4,561	4,458

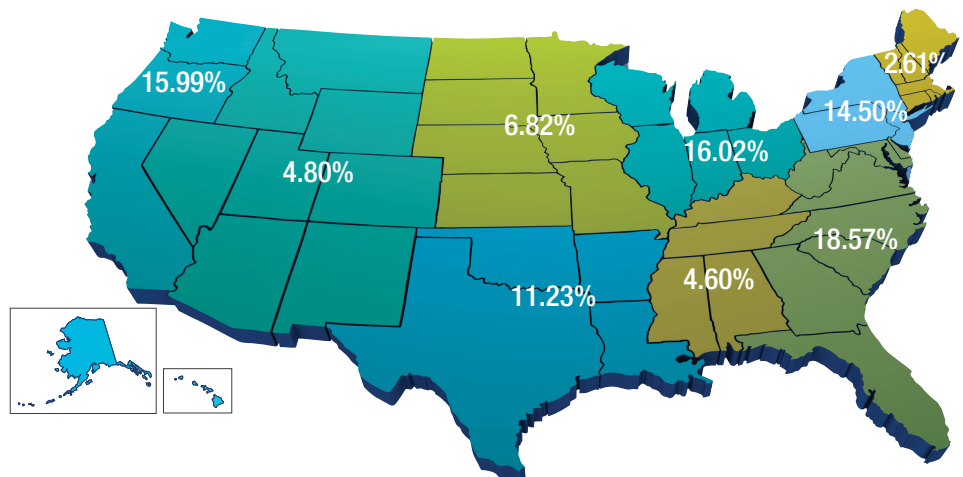
Total Professional vs. Professional International Attendance



Domestic Attendance vs. International Attendance 2012



Attendance by Domestic Region



EDUCATION • INSPIRATION • ILLUMINATION

ISC2014

The American Stroke Association's International Stroke Conference 2014 in San Diego will be a gathering of influential physicians, scientists and researchers who are committed to the latest developments in cardiovascular disease and stroke. The Science and Technology Hall provides a unique extension of their educational experience as they review the products and services designed for this important specialty.

ASA CONTACTS

American Stroke Association
7272 Greenville Ave.
Dallas, TX 75231
strokeconference.org

Exhibits

Julie Davis
(214) 706-1943
julie.davis@heart.org

Rita Pacheco
(214) 706-1873
rita.pacheco@heart.org

Advertising Opportunities

Cathleen Gorby
Ascend Integrated Media
(913) 780-6923
cgorby@ascendintegratedmedia.com

Funding/Sponsorship Opportunities

April Smith
Corporate Relations
(214) 706-1235
april.smith@heart.org

Facility Information

General Contractor
Freeman

Housing

Travel Planners
(877) 468-3548
asahousing@tphousing.com

Registration

Convention Data Services
(800) 748-3583
internationalstroke@expressreg.net

EXHIBITOR BENEFITS

Why you should exhibit?

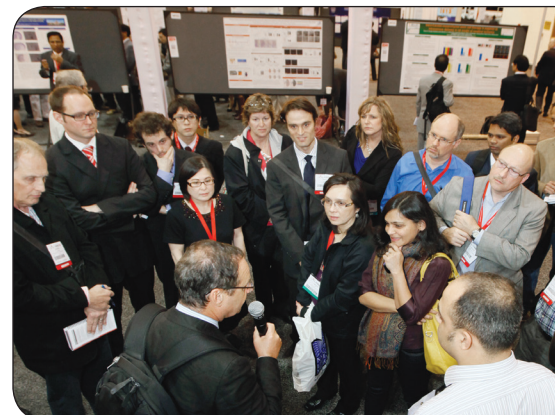
- The International Stroke Conference is the largest meeting of its kind
- Your customers and prospects are here.
- Attendees look at the Science & Technology Hall as an extension of our extensive education and program offering

Exhibitor Benefits

- Direct access to 4,000 health care professionals during the five hours of unopposed Science & Technology Hall Time
- Access to a complimentary final registration list for the ISC 2013 and access to the ISC 2014 Advance Registration list for booth mailers
- Allotted complimentary company registration badges and unlimited exhibits-only badges
- Access to negotiated housing rates
- Opportunity to participate in any AHA/ASA promotional opportunities outlined in this prospectus or online at www.exhibitatstroke.org
- Opportunity to hold Unofficial Satellite Events

Cost-saving efforts by the AHA

- Exhibitors are given the opportunity to do all work on straight time
- Flat-rate material handling charge for 100cwt whether in advance or direct shipment
- Reduced minimum weight to 100 pounds versus standard 200
- No special handling or overtime charges on material handling



For more detailed exhibiting information, visit exhibitatstroke.org.

For ASA Use Only		
Date Received	Time	VIA
Payment	Batch #	Initials
Booth Assigned	Date	PPT

Exhibit Space Application/Contract

Print or Type (Incomplete applications will not be accepted.)

Exhibitor Information: Company name should appear as the official exhibiting company.

New Exhibitor? YES NO
 Past Exhibitor Sessions Stroke Specialty Conference

company (exhibiting as) _____ previous company names (if different from current company name): _____

Address _____ toll free telephone _____

City _____ state/province _____ zip/postal code _____ Country _____ company web site _____

primary contact _____ Title _____ Telephone _____ Fax _____ e-mail address _____

marketing/advertising contact _____ Title _____ Telephone _____ Fax _____ e-mail address _____

Preferences: The following will be used as a guide in assigning your exhibit space.

List of products/services to be displayed:

FDA Status: Approved In Process Not Applicable

Competitor Proximity: Complete the following sentences:

We would like to be near: _____

We don't want to be near: _____

Assignment Priority: Please rate the following preferences 1–3 in order of importance. Use 1 for the most important and 3 for the least.

Floor Location _____ Competitor Proximity _____ Corner Location _____

Exhibit Selection: Please list four choices, in order of preference, for your exhibit location. See the enclosed floor plan for the exhibit hall layout

Booth#

1 _____ 2 _____ 3 _____ 4 _____

Dimensions _____ X _____ = _____ sf

Select Visibility Package(s): Enhance your listing in exhibit hall print publications

\$250 Highlighted Listing, includes company logo in ISC Stroke News Daily Newspaper

Exhibit Space Rates:

Through July 7, 2013 \$30 psf
 Beginning July 8, 2013 \$33 psf
 Non-profit rate \$20 psf-deadline to take advantage of this rate is July 8, 2013

Payment:

Exhibit Space: _____ sq. ft. x \$ _____ = \$ _____

Payment Options

_____ Invoice: AHA will invoice you upon space assignment and acceptance of your space application/contract.

*Please note that you will not receive a confirmation until AHA has received the 30% deposit.

OR

Fax completed application and credit card information to (214) 706-1517. Your submission of this signed form by facsimile evidences your agreement that such facsimile is intended by you to be a binding agreement as to the terms and conditions contained herein. Fax submission does not constitute acceptance of application. Applications are accepted upon space assignments.

Method of Payment Credit Card

If paying by credit card, please complete the following:

Card: VISA MasterCard American Express Amount to charge \$ _____

Card # _____ Exp. Date _____

Signature of card holder **X** _____

Card holder's name _____

Address _____

City _____ State _____ ZIP _____

Phone _____

Fax _____

AHA/ASA Cancellation Schedule:

AHA/ASA retains 30% of contracted exhibit space cost after July 8, 2013.
 AHA/ASA retains 100% of contracted space after October 1, 2013.

Submission of application does not constitute acceptance or approval by AHA. AHA requires a 30% deposit before exhibit space will be confirmed. Cancellation or space reduction will result in a 30% penalty.

Agreement —We, the undersigned, hereby make application for exhibit space at the American Heart Association's International Stroke Conference 2014 in San Diego, CA and authorize the AHA to reserve exhibit space on our behalf. A signature on this application indicates understanding and agreement to comply with all policies, rules, regulations, terms and conditions as outlined in the Prospectus, online at exhibitstrokem.org and any others issued by AHA regarding the American Heart Association's Scientific Sessions, willingness to abide by the payment policy and acknowledgement of having agreed to the AHA Scientific Conferences Rules & Regulations and agreement that the AHA Scientific Conferences Rules & Regulations are an integral and binding part of this contract. Submission of application does constitute acceptance or approval by AHA until space has been assigned and a booth confirmation has been sent.

X _____ Signature of Authorizing Officer
 _____ Name of Authorizing Officer
 _____ Title
 _____ Date