



**EYE BANK
ASSOCIATION
of AMERICA**

EXHIBITOR PROSPECTUS

**ANNUAL MEETING
JUNE 4-7 2008**

The Westin Diplomat Hotel
Hollywood, Florida

***It's that time again! Don't miss out on this
opportunity to participate in three of the
most important and productive days of your
year!***

Eye Bank Association of America
47th Annual Meeting and Exhibit Show

The Westin Diplomat Hotel
June 4-7, 2008

The EBAA Annual Meeting has an attendance of over 250 eye bank executives, hospital development coordinators, ophthalmologists and technicians. They set the pace for change and are constantly looking for new products, services, and technologies. The EBAA Annual Meeting is the one place they know they will find what they are looking for.

The EBAA Annual Meeting is the ideal venue for you to promote your products and services to a wide variety of national and international leaders. Your competitors attend each year-don't miss this opportunity to keep up, and to showcase your company to a wide variety of decision-makers. **Plus, you can make sales directly from your booth.**

Who Attends?
Your Future Customers!

Over 95% of the Eye Banks in North America will be represented at this meeting. Eye banks must purchase state of the art equipment, supplies and services to aid in sight restoration.

Exhibitors Information

Exhibit Hours: *These hours are tentative and subject to change. An updated schedule may be sent with confirmations in May.*

Wednesday, June 4: 1:00 pm-4:00 pm Exhibitor Move In

Thursday, June 5: 7:30am Exhibit Hall opens/Breakfast
 10:00-10:30 am Coffee Break
 1:15 pm-1:45 pm Dessert in Exhibit Hall
 3:45-4:00 pm Coffee Break
 6:00 -7:30 pm Welcome Reception/Raffle

Friday, June 6: 7:30am Exhibit Hall opens/Breakfast
 10:00-10:25 Coffee Break
 12 noon Exhibit Move Out

EXHIBIT FEES

Commercial & For Profit Organizations:	\$1,000 before April 1 \$1,200 on or after April 1
EBAA Member Organizations: (Active, Associate & Sponsoring Orgs.*)	\$ 500 before April 1 \$ 600 on or after April 1
Non Profit Organizations	\$ 700
Extra Meeting Badges: (Each booth receives two meeting badges with the registration fee)	\$ 100
Annual Dinner Ticket	\$100 each
Luncheon Ticket	\$ 50 each

**Sponsoring organizations apply for this status and pay \$2500 per year.*

*Payments to be returned to EBAA office
Fax: 202-429-6036
Mail: EBAA, 1015 18th St, NW,
#1010
Washington, DC 20036*

EXHIBITOR REGISTRATION INCLUDES THE FOLLOWING:

Two Free Registrations: Two free Annual Meeting registrations for two exhibit personnel only who work the booth. Registration includes: Meeting Packet, Meeting Gift, Name Badge, Admittance to the Welcome Reception, All Breakfasts and Breaks, plus admittance to all General and Scientific Sessions. We are also offering registration discounts for designated company employees.

Exhibit Space: One 6' X 30" Skirted Table, Two Chairs, a Wastebasket and your I.D. Sign

Free Mailing Labels: A Pre and Post set of address labels of all Meeting Attendees to help you pursue leads.

Free Listing in the Annual Meeting Program: Your listing includes your company name, address, contact person, telephone and fax numbers with a brief description of your products and services. You will also be listed in the Pre Meeting Newsletter.

Please register early! We look forward to welcoming repeat exhibitors who have become old friends and wish to make new friends!

SPONSORSHIPS ARE WELCOME – See Attached Documents for additional opportunities for the 2008 EBAA ANNUAL MEETING

EXHIBITOR APPLICATION/CONTRACT

In accordance with the information contained in the Exhibitor Prospectus, which have been formulated in the best interest of the Exhibitor, EBAA and the Westin Diplomat, this agreement will serve as the Contract between the Exhibitor and the other parties heretofore mentioned. **(Please Print)**

Contact Person _____

Organization Name: _____

Address: _____

City: _____ ST _____ Zip: _____

Telephone: _____ FAX: _____ E-mail: _____

Name of on-site staff members (Each exhibitor may have two on-site staff members to man the booth as part of the exhibit fee, additional tickets for social functions and meals can be purchased in advance.)

(1) _____

(2) _____

Address (if different from above): _____

City: _____ ST: _____ Zip: _____ Phone: _____

FEES: Commercial Exhibitors	\$1,000 before April 1	\$1,200 after April 1
EBAA Member Organization	\$ 500 before April 1	\$ 600 after April 1
Non Profit Organization	\$ 700	

Annual Dinner \$100 per ticket: _____ Thursday Lunch \$50: _____ Friday Lunch \$50 _____

PAYMENT TERMS Check enclosed in US Currency
Charge my: VISA** Mastercard AmEx Discover

Account #: _____

Exp. Date: _____ **Last 3 digits on back if VISA: _____

Cardholder Name: _____

Signature: _____

Billing Address (Zip Required): _____

Return by Fax: 202-429-6036 or mail EBAA/1015 18th St. NW, #1010, Washington, DC 20036

Security Release: The Exhibit Area may not be locked and secured. The exhibitor assumes the entire responsibility and liability for losses, damages and claims arising out of injury or damage to exhibitor's displays, equipment and other property brought upon the premises of the Westin Diplomat Hotel and shall indemnify and hold harmless the EBAA and Westin agents, servants and employees from any and all such losses, damages and claims. Please sign below to acknowledge that the EBAA bears no responsibility for any loss or damage in connection with the EBAA Annual Meeting at Westin Diplomat. If these arrangements are not suitable, exhibitors are responsible for making alternative arrangements to ensure adequate safety of items of value.

Signature: _____ Date: _____

Indicate if you will require electricity: yes___ no ___
Helms Electric order form is included with this prospectus

I do not wish to have my exhibit placed next to the following vendor(s):

SHIPPING INFORMATION:

All materials may be shipped directly to the hotel no more than (3) days prior to the meeting dates. If storage exceeds 3 days there will be additional charges from the Business Center. The Corporate Business Center is located in the Westin Diplomat Hotel for information call 954-457-7109 ext 0 or 1. They will handle the outgoing packages as well.

SHIPPING LABELS:

Please visit the website for the Business Center for label shipping information: www.corpbusscen.com

We do not use booth numbers. You need to have your company name and EBAA on all packages as well as the hotel guest name.

ORGANIZATION DESCRIPTION FOR MEETING PROGRAM:

Please provide a type written description of the company, products, and/ or services. This information will be printed in the meeting program and may not exceed 100 words. Due by April 15

Send to:

Trish Hardy

Eye Bank Association of America, Inc.

1015 18th Street, NW, Suite 1010

Washington, D.C. 20036

Fax: 202-429-6036/ Phone: 202-775-4999

REGISTRATION DEADLINE:

March 11, 2008 for \$1,000.00 exhibitor fee

April 15, 2008 for \$1,200 exhibitor fee

CANCELLATION POLICY:

Exhibitors canceling before **May 4, 2008**, will be charged 50% of the exhibit fee.

Exhibitors canceling after that date will be charged the full space rental fee.

RAFFLE: There will be a raffle held on Thursday evening, June 5 in the exhibit hall during the welcome reception. Please notify Tricia Petras at tspplanit@aol.com prior to the dates of the meeting if you will be providing an item for the raffle.

COMMUNICATION

Please direct all communications regarding exhibits to:

Tricia Stevens Petras

Annual Meeting Planner

105 Twin Ridge Lane

Richmond, VA 23235

(804) 320-2833/phone

(804) 272-1320/fax

E-mail: tspplanit@aol.com

Revision 1/8/2008