



Program Highlights

Terry Treadwell, M.D.
The Institute of Advanced
Wound Care

Philip Jacobs, PhD
University of Alberta

Chris N. Airriess, PhD
CorTechs Labs

Ellen Turner
Eastman Chemical Company

Mark L. Boyle
Amada Miyachi America, Inc.

Mehmet R. Dokmeci, PhD
University of California Los Angeles
(UCLA)

Program Topics

Advances in New Materials

Medical Device Design and Development

Advances in Material Applications & Processing

Advances in Manufacturing, Assembly & Integration

Miniaturization of Medical Electronics

Biofabrication, Rapid-prototyping & Imaging for Tissue Engineering

Implantable Electronic Devices

Components and Systems Assembly

Product Reliability, Safety, & Regulatory Requirements

End Product Applications

Medical Electronics Market Advancement

Chip & Package Level Manufacturing

Dates & Deadlines

Abstracts Due

March 26, 2020

Papers Due

May 21, 2020

Presentations Due

July 23, 2020

Authors

Submit by email to nasimu@imdsociety.com

- A title with full names (first and last), contact info of all authors and co-authors
- An abstract (about 150-words)
- Bio & Professional Photo
- These items will be used for email PR and program announcements

Exposition Space

The space is a 8ft Table Top
Includes one full conference registrations with library access
Please call the IMD office for details.
Phone (734) 997-9249
Rental Rate: \$2,500

Reception Sponsorship

Minimum Sponsorship: \$6,000
• One 8ft Table Top
• Hosted Premium Bar and Hors d'oeuvres
• Two Full Conference Registrations
• Company Name Printed on all IMD 2020 Promotional Materials on imdsociety.com

Rental Rate Includes

- (1) Table with tablecloth, skirt and (2) Chairs
- Complete Exhibitor Service Manual
- 24-hour Peripheral Security
- One-time email blast with over 3,000 recipients

Exhibit Space / Sponsorship Contract

Please complete this form in its entirety

Exhibit Space Assignment Terms:
Table Top Only: 8ft: \$2,500

Reception Sponsor: \$6,000

Sponsorship Amount \$ _____

Sponsor of _____

Total Cost Submitted \$ _____

BOOTH LOCATION: First Choice: _____ Second Choice: _____ Third Choice: _____

Exhibitor agrees to enclose the full amount along with this agreement. Exhibitor agrees to the terms and conditions on both sides of this contract and that the exhibit space will be assigned by IMD, IMD taking into consideration the date of receiving contract, payment, and previous history of exhibitor.

IMD agrees that it will make its best efforts to avoid locating this Exhibitor next to the following potential exhibitors: _____

Please include a brief company description along with a high resolution logo to be used for signage and promotional materials.

PAYMENT IS DUE WITH CONTRACT.

CANCELLATION: Please read the cancellation clause on the full Exhibit Space Contract found on the IMD website. It will be enforced.

Please Print or Type (ALL FIELDS REQUIRED)

I'd like to receive email communications about this and future IMD events:

Full Name: _____

Title: _____

Organization: _____

Email: _____

Card Number: _____

Expiration Date: _____

CVC: _____

Amount: _____

Street Address: _____

ZIP: _____

Phone (Office): _____

Mobile: _____

General Registration

- Access to all sessions during the conference
- Exclusive access to the IMD 2020 on-line library (login information emailed)
- Coffee & tea breaks with pastries
- Premium Lunch & Dinner w/drinks
- Networking evening reception with complimentary drinks and hors d'oeuvres

\$595

Authors, Chairs, Registration

- Access to all sessions during the conference
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- Coffee & tea breaks with pastries
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\$595