



*Anti-Aging Medical News*

# EXHIBITOR LISTING



Dec. 8<sup>th</sup>-10<sup>th</sup>, 2011 • Las Vegas, NV  
**Submission Deadline: September 29th 2011**

**Company Name:** \_\_\_\_\_ **Booth #** \_\_\_\_\_

Use my Exhibitor Listing from the most recent issue (with changes below).

OR

Please use the information from this interactive form.

<b>Address:</b>		<b>City:</b>		<b>St/Prov:</b>	
<b>Zip:</b>		<b>Country</b> (if not U.S.A.)			
<b>Phone:</b>		<b>Website:</b>			
<b>Fax:</b>		<b>E-Mail:</b>			

## SAMPLE



1

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**BOOTH #XXX**

**COMPANY NAME**  
 5406 Bolsa Avenue  
 Huntington Beach, CA 92649

**PHONE:** 714-230-3150  
**FAX:** 561-999-1989  
**WEBSITE:** www.enterwebsite.com  
**EMAIL:** none@enteremail.com

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Paste Company Description Here. 2

For every exhibit space booked, exhibitors will be entitled to an Exhibitor Listing in the A4M Show Guide section that includes the following:

- **Company Logo** (instructions listed below)
- **Company Information** (information listed above)
- **Company Description** (Use the section below to describe your organization and/or exhibitor's products and services.)

### 1 Company Logo Submission Guidelines

- Logo must be at least **300 dpi**.
- Logo must be print-ready artwork in **CMYK** color mode.
- Acceptable file types include **EPS, AI, PSD, JPG, or TIFF**.

For further information, contact Leah at **(714) 230-3155** or email us at [aamn@mpamedia.com](mailto:aamn@mpamedia.com)

### 2 Company Description (35 words max)

**Please complete the following form and email back along with items 1 & 2 to [aamn@mpamedia.com](mailto:aamn@mpamedia.com)**

Publisher: Tel: (714) 230-3150 • Fax: (714) 850-0153 • Email: [aamn@mpamedia.com](mailto:aamn@mpamedia.com)

MPA Media • 3080 S. Harbor Blvd. • Santa Ana, CA 92704

Conference & Exhibition Management Office: Tel: (561) 997-0112 Fax: (561) 997-0287 Email: [sales@worldhealth.net](mailto:sales@worldhealth.net)

American Academy of Anti-Aging Medicine • 301 Yamato Rd Suite # 2199 • Boca Raton, FL 33431 USA



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# BUYERS' GUIDE LISTING



Dec. 8<sup>th</sup>-10<sup>th</sup>, 2011 • Las Vegas, NV  
**Submission Deadline: September 29th 2011**

Exhibitor Order Form

<b>Company:</b>				<b>BOOTH #</b>	
<b>Address:</b>		<b>City:</b>		<b>St/Prov:</b>	
<b>Zip:</b>		<b>Country</b> (if not U.S.A.)			
<b>Phone:</b>		<b>E-Mail:</b>			
<b>Fax:</b>		<b>Website:</b>			

**Basic Listing:**

- First category at no charge
- Additional Categories \$65 each

*BASIC LISTING SAMPLE*

**Company Name**  
 5406 Bolsa Ave (714) 230-3150  
 Huntington Beach, CA 92649 www.mpamedia.com.com  
 USA

OR

**Premium Listing:** (see Pg 2)

- First category \$200
- Additional Categories \$135 each

*PREMIUM LISTING SAMPLE*

**Company Name**  
 Address  
 City, State/Province  
 Postal Code  
 Country (if not in USA)

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Phone Number  
 www.website.com  
 Please see Ad on page ###

Please select your categories:

<p><b>B</b> <input type="checkbox"/> Aesthetic Medical Treatments</p> <p><input type="checkbox"/> Alternative Therapies</p> <p><input type="checkbox"/> Associations/Education</p> <p><input type="checkbox"/> Compounding Pharmacies</p> <p><input type="checkbox"/> Computers/EMR</p> <p><input type="checkbox"/> Cosmeceuticals</p> <p><input type="checkbox"/> Dental</p> <p><input type="checkbox"/> Dermatology</p>	<p><b>B</b> <input type="checkbox"/> Diagnostic Service/Laboratories</p> <p><input type="checkbox"/> Hair Rejuvenation</p> <p><input type="checkbox"/> Holistic Medicines</p> <p><input type="checkbox"/> Hyperbaric/Oxygen Therapies</p> <p><input type="checkbox"/> Insurance/Finance/Practice Management/Marketing</p> <p><input type="checkbox"/> Med Spa/Equipment</p> <p><input type="checkbox"/> Medical Equipment/Supplies</p>	<p><b>B</b> <input type="checkbox"/> Medical Publications/Directories</p> <p><input type="checkbox"/> Mesotherapy/Hormone Therapies</p> <p><input type="checkbox"/> Misc</p> <p><input type="checkbox"/> Nutraceuticals</p> <p><input type="checkbox"/> Pharmaceuticals</p> <p><input type="checkbox"/> Sports/Fitness/Physical Therapies</p> <p><input type="checkbox"/> Stem Cell Therapies</p> <p><input type="checkbox"/> Weight Management</p>
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**TOTAL PURCHASE: \$**

Credit Card #:	CID#:	Exp Date:
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**Signature:** \_\_\_\_\_

**Date** \_\_\_\_\_

Please complete the following form and email with ad copy files back to [aamn@mpamedia.com](mailto:aamn@mpamedia.com)

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# BUYERS' GUIDE PREMIUM LISTING SUBMISSION FORM

Dec. 8<sup>th</sup>-10<sup>th</sup>, 2011 • Las Vegas, NV  
Submission Deadline: September 29th 2011

Company Name: \_\_\_\_\_ Booth # \_\_\_\_\_

## 1 Product Photo Submission Guidelines (For Premium Use Only)

- Logo must be at least **300 dpi**.
- Logo must be print-ready artwork in **CMYK** color mode.
- Acceptable file types include **EPS, AI, PSD, JPG, or TIFF**.

For further information, contact Leah at (714) 230-3155 or email us at [aamn@mpamedia.com](mailto:aamn@mpamedia.com)

## 2 Description (For Premium Use Only) *50 words max*

Please complete the following form and email with ad copy files back to [aamn@mpamedia.com](mailto:aamn@mpamedia.com)

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