

2024 PES Industry Sponsored Virtual Symposia Policies and Guidelines

Virtual sessions can be scheduled at a date and time that is mutually convenient for both PES and company. The cost for holding a virtual symposium is **\$20,000 USD**. Sessions can be offered live or pre-recorded and will be available after the session to PES members via a link on the PES website.

Virtual Meeting Platform

The Sponsor will host and record the session on a platform of their choosing at their own expense.

Promotion

PES will promote the session to our full membership via email and social media outlets. The session can also be advertised through our PES Connected online community and on the PES website. (Sponsor is responsible for providing content for all advertisements.)

Program Content

Sponsors are responsible in entirety for all program content, management of content, speakers, and any registration. PES can provide input and suggestions for program content and speakers upon request.

CME

If CME is being offered, sponsor is responsible for arranging, organizing, and paying any fees associated with offering CME for their session. PES is not an accredited CME provider, but we can recommend the third-party company we use upon request.

Session Registration

The Sponsor is responsible for any on-line registration system and/or RSVP process. PES will promote the sessions and communicate the registration instructions.

Faculty Honoraria

Any faculty honoraria are the sole responsibility of the Satellite Symposium Sponsor.

Evaluations

The Sponsor will be responsible to provide its own evaluations and is solely responsible for any logistics of preparing, collecting, and compiling the results.

PES 2024 Industry-Sponsored Virtual Symposium Form

PLEASE TYPE

***Sponsoring Company/Organization Name:**

Contact Name and Title:

Street Address:

City: _____ **State/Province:** _____ **Zip/Postal Code:** _____

Phone: _____ **E-mail:** _____

Requested Date & Time preferences for Symposium:

1. _____
2. _____
3. _____

****Please indicate if the session is being organized by a third-party company (e.g., education) other than the Sponsor and provide below the company's name(s):***

Brief Description for promotional purposes (if approved):

PAYMENT:

Total Payment Amount: \$20,000 USD

Payment options:

- Check
- Credit card
- Wire transfer

CHECK PAYMENTS: PLEASE MAKE PAYABLE IN U.S. FUNDS, DRAWN ON A U.S. BANK, AND MAIL COMPLETED FORM AND CHECK TO:

Pediatric Endocrine Society
6728 Old McLean Village Dr.
McLean, VA 22101

CREDIT CARD PAYMENTS:

Type of Card: ___ VISA ___ MC ___

Credit Card # _____ Exp: _____ CVC: _____

Name on Card _____

Signature _____

WIRE FUNDS TO PES:

Bank Name: John Marshall Bank
Address: 1943 Isaac Newton Sq. Suite 100, Reston, VA 20190
Routing Number: 056009356
Account Number: 1000094050

By signing this form, I acknowledge that I have read and agree to comply with the Society's Guidelines for Industry- Sponsored Symposium sessions. I will be responsible for all charges associated with this function and no charges are to be billed to the Pediatric Endocrine Society. Violations of these guidelines may result in cancellation of function assignment. Any changes in date and time must be pre-approved by the Society.

Signature: _____

Date: _____

Print Name and Title: _____

CHECK LIST OF NEEDS:

- | | |
|---|---|
| <input checked="" type="checkbox"/> Proposal/summary of session | <input checked="" type="checkbox"/> Sponsoring company logo YES/NO? |
| <input checked="" type="checkbox"/> List of Speakers/faculty | (If yes please provide high resolution |
| <input checked="" type="checkbox"/> Learning objectives | logo for promotional emails) |
| <input checked="" type="checkbox"/> CME being offered YES/NO? | |