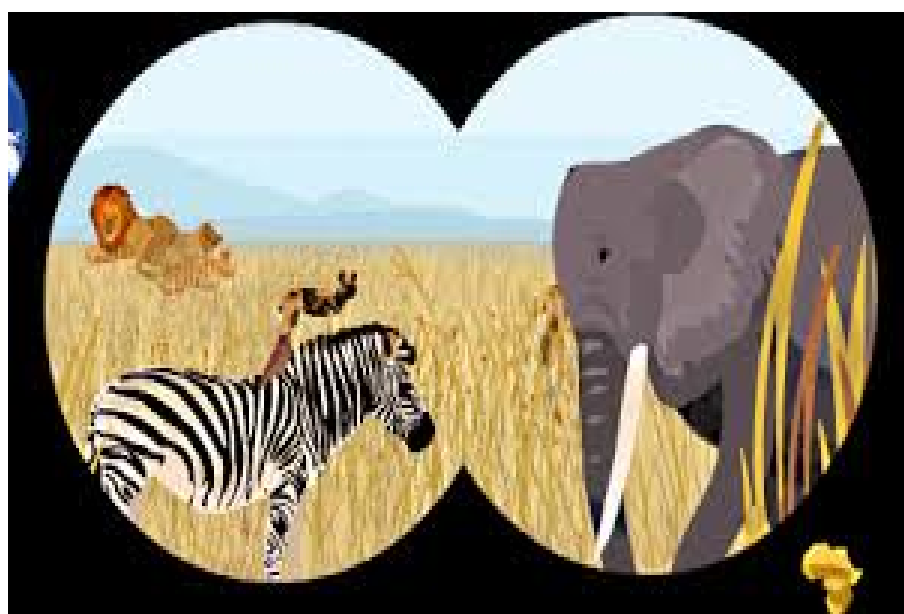




**49<sup>TH</sup> SPRING MEETING**  
**MARCH 20-23, 2019**

***“SCACM SAFARI AT THE KALAHARI:  
NEW ADVENTURES IN THE MICROBIAL JUNGLE”***



**KALAHARI RESORTS**  
**SANDUSKY, OH**

**EXHIBIT CHAIRS:**  
**MARY PLENZLER AND CAROL YOUNG**

# SCACM EXHIBIT SPACE APPLICATION

Applications received before January 15, 2019 will receive priority space assignment.  
After January 15th, space assignment will be based on availability.

You may reserve space for your use in the Exhibit Area at the Annual Spring Meeting of the South Central Association for Clinical Microbiology (SCACM) to be held at Kalahari Resort in Sandusky, OH. All registration will be done electronically (see links below).

**We are requesting registration at this time for our state fall meetings** (Illinois, Indiana, Kentucky, Michigan, Ohio, West Virginia and Wisconsin). We believe this will reduce the number of requests to our exhibitors and allow us to be more efficient in planning those meetings. Please register for as many as you wish to attend. There will be a second opportunity for fall exhibits in May!

Question regarding this process:

Carol Young [youngc@umich.edu](mailto:youngc@umich.edu)

734-417-7797

Mary Plenzler [mplenzler@bex.net](mailto:mplenzler@bex.net)

419-236-5710

[mary.plenzler@promedica.org](mailto:mary.plenzler@promedica.org)

419-291-5794

## Registration Fees

<b>Annual Spring Meeting</b>	
First exhibit booth (includes 2 lunch tickets)	<b>\$600</b>
Each additional booth	<b>\$500</b>
Additional lunch tickets	<b>\$30</b>
Exhibitor Workshop	<b>\$100/hour</b>
Sponsor Coffee Break	<b>\$250-500</b>
Educational Grant	<b>Any amount</b>
<b>Fall State Meetings</b>	
Each state	<b>\$400</b>
All 7 state meetings (1 free)	<b>\$2400</b>

## Registration Links:

### SCACM Spring and Fall Exhibit Space 2019

Select "EXHIBIT Booth(s) Purchase" at <https://scacm27.wildapricot.org/event-3086589> then choose from list of Spring and Fall options.

### SCACM Exhibitor Workshops 2019

Select from "Spring- EXHIBITOR WORKSHOP" options at <https://scacm27.wildapricot.org/event-3086589>

### 2019 SCACM Educational Grants

Select "Spring Coffee Break Purchase" at <https://scacm27.wildapricot.org/event-3086589>

Enter Any Amount at <https://scacm27.wildapricot.org/SCACM-Corporate-Partners>

## Hotel reservations

<https://stayoh.kalahariresorts.com/ohio#groupSignIn> Booking ID 27747

# SPRING EXHIBIT RULES & REGULATIONS

## DATES & HOURS

### Thursday March 21, 2019

Installation.....12:00-5:00 PM  
Exhibitors Meeting\*.....3:00 PM  
Exhibit Hours.....7:00-9:00 PM  
\*All exhibitors are requested to attend. Exhibit information will be provided at this meeting.

### Friday March 22, 2019

Exhibit Hours...10:15 AM -12:15 PM  
Removal: at close of exhibit hours until 3 pm

Exhibits must not be dismantled before the 12:00 PM closing of the Exhibit Area.

Exhibit Fee includes 2 tickets for the Friday Noon Luncheon. Additional lunches are \$30 per person, Exhibitors who want to attend the scientific sessions may do so without incurring any additional costs.

## PLACE/Hotel reservations

Kalahari Resorts  
7000 Kalahari Dr  
Sandusky, OH 44870  
Reservations: Rate available until 3/1/19  
1- **877-525-2427 Mention SCACM**  
2- On-line reservation link:  
<https://stayoh.kalahariresorts.com/ohio#groupSignIn>  
Booking ID 27747

SCACM rate \$129.00 plus 13.75%

**NOTE:** There is a first night deposit charged to your credit card. Reservations canceled 72 hours or more prior to the date of arrival receive a refund of the deposit, minus a \$25 cancellation fee. Reservations canceled within 72 hours of the date of arrival forfeit the entire deposit.

## BOOTHS

Each booth will be 8' x 10' (Measure your displays carefully to make sure they fit the number of booths ordered.) and includes a skirted table, two chairs, 8' high back curtain, 3' high side dividers, a 7" x 44" sign.

Electrical service will have to be ordered from the Kalahari Resorts:  
[https://www.kalaharimeetings.com/media/251879/OH\\_service\\_order\\_form.pdf](https://www.kalaharimeetings.com/media/251879/OH_service_order_form.pdf)

Other exhibit needs must be rented from Fern Exposition whose address and phone number can be found below.

## LIABILITY

Exhibitors shall assume all responsibility for their damage to the exhibit areas. Exhibitors are also responsible for their equipment.

## ID Badges

All exhibitors must wear the ID badge provided by SCACM while in the exhibit area.

## APPLY for your Booth:

- Proceed to our online registration form at <https://scacm27.wildapricot.org/event-3086589>
- Select **EXHIBIT Booth(s) Purchase**
- Select **Spring-Initial Booth**
- As needed, purchase additional booth(s) and lunch(es) from the options provided.

## ASSIGNMENT of SPACE

- Assignment of booth space and location will be made in the order received.
- **Registration and Payment must be received by March 14, 2019.**
- The floor plan for the Exhibit Area is attached. SCACM reserves the right to rearrange the floor plan and/or relocate individual exhibits.

## SHIPPING INSTRUCTIONS

All shipments must be prepaid and arrive by March 19, 2019. Each package shipped must have the following information on the label:

1. Your Company's Name
2. Show Name: SCACM Meeting, March 21-22, 2019
3. Booth Number (To be provided by SCACM)
4. A service kit with preprinted labels will be sent to all exhibitors from Fern Expo

Ship Exhibit Materials to:  
Fern Exposition  
1500 Old Leonard Ave  
Columbus, OH 43219

**MUST ARRIVE BY March 19th.**

**No show site deliveries will be accepted.**

Fern Exposition Contact:  
502-367-0254, FAX: 502-368-0284

**Request for Taxpayer  
Identification Number and Certification**

► Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

**Give Form to the  
requester. Do not  
send to the IRS.**

Print or type.  
See Specific Instructions on page 3.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.

**South Central Association for Clinical Microbiology, Inc.**

2 Business name/disregarded entity name, if different from above

3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only **one** of the following seven boxes.

☐ Individual/sole proprietor or single-member LLC

☐ C Corporation

☐ S Corporation

☐ Partnership

☐ Trust/estate

☐ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ►

**Note:** Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is **not** disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.

☒ Other (see instructions) ► **501(c)3 non-profit corporation**

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):

Exempt payee code (if any) \_\_\_\_\_

Exemption from FATCA reporting code (if any) \_\_\_\_\_

(Apply to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.) See instructions.

**8621 Whitecliff Ct.**

6 City, state, and ZIP code

**Sylvania, Ohio 43560**

7 List account number(s) here (optional)

Requester's name and address (optional)

**Part I Taxpayer Identification Number (TIN)**

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

**Note:** If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number

\_\_\_\_ - \_\_\_\_ - \_\_\_\_

or

Employer identification number

2 3 - 7 1 4 8 0 2 0

**Part II Certification**

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

**Sign  
Here**

Signature of  
U.S. person ►

*William H. Helms*

Date ► **01/10/2019**

**General Instructions**

Section references are to the Internal Revenue Code unless otherwise noted.

**Future developments.** For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9).

**Purpose of Form**

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

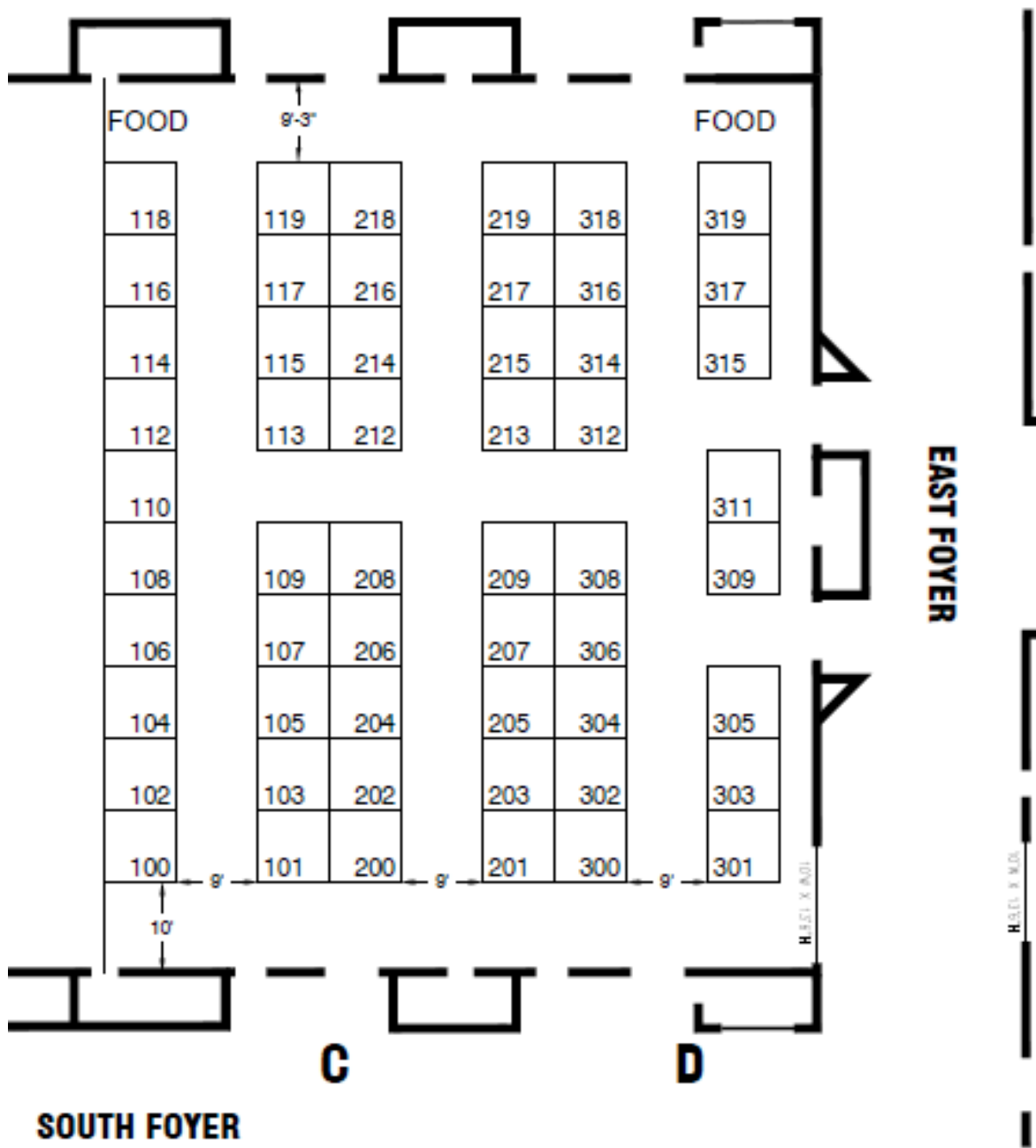
- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See *What is backup withholding*, later.

# SCACM SPRING EXHIBIT FLOOR PLAN



## EXHIBIT ENTRANCE

IF WE SELL OUT CURRENT SPACE WE WILL ADD BOOTHS TO THE LEFT, BEHIND 100-118

# SPRING EXHIBITOR WORKSHOP OPPORTUNITY

The SCACM Board of Directors is pleased to announce to exhibitors the opportunity to present workshops at our annual SCACM meeting. This year you have the opportunity for one hour or two hour workshops on Wednesday and Thursday, March 20 and 21, 2018 at Kalahari Resorts, Sandusky, OH. There will be 5 dedicated sessions which include providing a meal.

[Catering Menu Link](#)

Wednesday	March 20, 2019	Thursday	March 21, 2019
7–8 am	Breakfast	8-10 am	Breakfast
12-1 pm	Lunch	11:30 am-1:30 pm	Lunch
5-7 pm	Dinner		

You may also sign up to have a workshop on Thursday between 10-11:30am and 1:30-5pm. The SCACM sponsored workshops will be held on Wednesday, March 20, 2018 so they will not conflict with the exhibitor workshops. Having the workshops on two different days will provide additional continuing education opportunities for our membership and dedicated exhibitor workshop sessions.

Exhibitor Responsibilities	SCACM Responsibilities
Topic and speaker(s)	Meeting room(s) block
Travel/Accommodation for speaker	Announcement on scacm.org
Registration: signs/name tags	Link to exhibitor website
Arrange with hotel:	
Food and/or beverages	
AV	
Meeting room fee \$100/hour	
Program & printed materials	
Evaluations	
CEU's	
All expenses related to workshop	

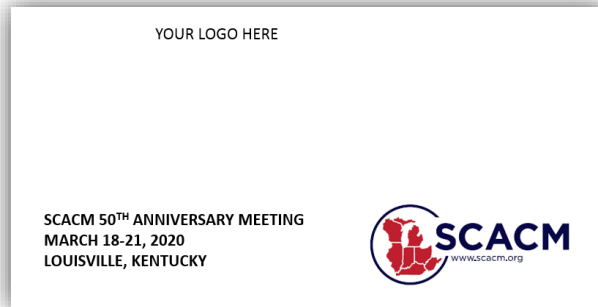
## APPLY for your Exhibitor WORKSHOP:

- Proceed to our online registration form at <https://scacm27.wildapricot.org/event-3086589>
- Select a “**Spring- EXHIBITOR WORKSHOP**” option that best meets your needs
- Provide additional information as requested in the form instructions.
- Carol Young, SCACM Exhibitor Workshop Chair, will then contact you to reserve your session.
- Sessions will be assigned on a first-come basis.

**Questions:** Contact Carol at [youngc@umich.edu](mailto:youngc@umich.edu), Cell: (734) 417-7797, Work: (734) 936-6846, FAX: (734) 647-9093

# OPPORTUNITY TO PROMOTE SCACM's 50<sup>TH</sup> ANNIVERSARY MEETING IN LOUISVILLE, KY

Further support can be provided by contributing **\$2,500** for SCACM to purchase promotional items for our 49<sup>th</sup> meeting to promote our 50<sup>th</sup> Anniversary year. Ideas we have include drawstring backpacks, badge holders, notebooks, ID pouch and other SCACM swag.



To provide this support:

Select our “**SCACM 50th Anniversary Sponsor**” option from our online registration form at <https://scacm27.wildapricot.org/event-3086589>

For more information contact:

Carol Young ([youngc@umich.edu](mailto:youngc@umich.edu))

First come, first serve to select the SCACM swag you'd like to sponsor promoting our 50<sup>th</sup> Annual Meeting.



# EDUCATIONAL ACTIVITY FUNDING OPPORTUNITIES

At previous SCACM meetings, many vendors have chosen to provide funding to support various activities occurring during the meeting. This support has the tremendous impact of keeping our meeting costs low and the quality of the educational program high, so that SCACM continues to be the premier clinical microbiology event at an affordable cost to bench level technologists.

Examples of support that has been provided in the past:

1. Unrestricted educational grants
2. Direct sponsorship of speakers (travel expenses, etc.)
3. Funding for coffee breaks, social activities, etc.
4. Purchase Audioconferences (live/recorded) for our drawings during exhibit hours.

If your organization is interested in providing support in this manner, please complete the online donation form at <https://scacm27.wildapricot.org/SCACM-Corporate-Partners> or if you have any questions, please contact:

Mike Brandon  
SCACM Spring Program Coordinator  
937-641-3902  
E-mail: [brandonm@childrensdayton.org](mailto:brandonm@childrensdayton.org)

or

Shaun Gabriel  
SCACM Corporate Liaison Chair  
513-568-3410  
Email: [smgabriel@beckman.com](mailto:smgabriel@beckman.com)