



FALL CLINICAL LIPID UPDATE LEAD RETRIEVAL

Company Information

Company Name _____

Contact Email _____

Company Contact _____

Contact Phone _____

Lead Retrieval Options

☐ Handheld Scanner | \$350/Scanner

Exhibitors will be provided with a handheld scanner at Exhibit Registration to capture leads.

Number of Hand-held Scanners _____ x \$350 = \$_____

☐ Mobile App License | \$400/1st License & \$200 for each additional license

Exhibitors will download an app on their device allowing them to use their own device to capture leads.

First mobile App License x \$400 = \$

Number of additional App Licenses _____ x \$200 = \$_____

☐ Developer/API Connection Kit | \$2,250 flat rate per exhibit company

Exhibiting companies have the option to use their own company scanners/equipment to integrate into the NLA's lead retrieval system to capture leads.

API Connection Kit x \$2,250 = \$_____

TOTAL \$_____

Payment and Billing Information

☐ Visa ☐ American Express ☐ MasterCard

TOTAL AMOUNT: \$_____

Name on Card _____

Card Number _____

Exp. Date _____ Security Code _____ Zip _____

Card Billing Address _____

MAIL: National Lipid Association
12574 Flagler Ctr. Blvd., Ste. 101, PMB 23
Jacksonville, FL 32258-2615

EMAIL: exhibits@lipid.org | akirkland@lipid.org

My signature below indicates that my card will be charged for the total amount listed above.

Print Name _____

Signature _____ Date _____

If you are purchasing Handheld Scanner(s), company understands and agrees that by signing this form they are responsible for any lost scanners at the rate of \$1,750.00/scanner.