

The Arkansas Society of Otolaryngology Head & Neck Surgery Conference

2026 Exhibitor Information

October 2-4, 2026
The Compton Hotel
200 E Central Ave,
Bentonville, AR 72712

This course is designed to present current information on the diagnosis and management of selected diseases commonly seen by Arkansas otolaryngologists

Exhibit Costs:

In order to exhibit at this event, please choose from one of the levels below.

Gold Level - \$4,000

- ☐ Company logo on conference website noted as a Gold Patron with clickable link to your website
- ☐ Company logo on signage throughout the activity
- ☐ Complimentary registration for (4) company representatives
- ☐ Priority placement in exhibit hall
- ☐ One 6 ft. exhibit table
- Option to purchase an additional exhibit table for \$500

Silver Level - \$2,000

- ☐ Company name on conference website noted as a Silver Patron
- ☐ Company name on signage throughout the activity
- ☐ Complimentary registration for (3) company representatives
- ☐ Assigned placement in exhibit hall
- ☐ One 6 ft. exhibit table

Bronze Level - \$1,000

- ☐ Company name on conference website noted as a Bronze Patron
- ☐ Company name on signage throughout the activity
- ☐ Complimentary registration for (2) company representatives
- ☐ Assigned placement in exhibit hall
- ☐ One 6 ft. exhibit table

EXHIBIT REGISTRATION FORM

CME ACTIVITY TITLE: The Arkansas Society of Otolaryngology Head & Neck Surgery

DATE: October 2-4, 2026

ACTIVITY LOCATION: The Compton Hotel
200 E Central Ave, Bentonville, AR 72712

EXHIBIT FEE: _____ (See available sponsorship levels)

EXHIBITOR INFORMATION – Please list company name exactly as it should appear in the official program.

COMPANY NAME:

EXHIBIT CONTACT NAME:

ADDRESS:

CITY:

STATE:

POSTAL CODE:

CONTACT PHONE:

CONTACT E-MAIL:

List your designated attendee(s) so they will be registered for the conference.

(Please refer to the sponsorship levels listed above for number of representatives)

Exhibitor staff name, title:

Exhibitor staff name, title:

Exhibitor staff name, title:

Exhibitor staff name, title:

Description of Product/Service Displayed:

Space Requirements:

Will your exhibit require electrical service? _____ Yes _____ No

Do you have any other special requirements? (extra fees may apply) _____ Yes _____ No

The Exhibit Space Fee is payment for the following:

- 6' X 30" exhibit table
- Breakfast and breaks each day for Company representatives (served during the Event)
- Formal recognition will be given during the meeting, in the final program and posted in Event space.

If you will require additional electrical supplies, such as power cords or surge protectors, there will be an additional charge.

If you are interested in participating, please fill out the form and return via email to (bospeed@uams.edu).