

Advanced Registration

Register ASAP to facilitate planning. Book your room before our **hotel cutoff date: January 4, 2019**. Reservations: Please contact the hotel at **888-567-6667** and ask for the **MOMA 2018 Winter Meeting Block: \$184 s/d**

[RESERVE ROOM ONLINE NOW - CLICK HERE!!!](#)

Cancellation Policy

Written cancellation must be made directly to MOMA. If received by Jan 13, MOMA will apply a 20% refund fee. After Jan 13, MOMA will apply a 40% administrative fee.

REGISTER TODAY!

RESERVE YOUR ROOM TODAY"

Come meet and interact with our providers, support our quality CME program, share the amenities of the Beau Rivage, and enjoy the many attractions of the Mississippi Gulf Coast!!!



Mississippi Osteopathic
Medical Association
PO Box 16890
Jackson, MS 39236



Mississippi Osteopathic Medical Association's 2019 Winter Meeting

"Issues in Primary Care"

***Pulmonology, Pneumonia,
Cardiology, Infectious Disease,
Rheumatology, OMT, Dermatology,
Diabetes, Mental Health, and More***

**January 25-27, 2019
Beau Rivage Casino Hotel
Biloxi, Mississippi**



Exhibitor Prospectus

MOMA invites you to exhibit at its Winter CME Meeting focusing on advancements in diagnosis and treatment of conditions relevant to all primary care providers. 70+ providers expected.

MOMA is accredited by the AOA to provide CME for osteopathic physicians. MOMA designates this program for approximately 20 AOA Category 1-A credits and will report CME and specialty credits commensurate with the extent of the physician's participation in this activity. Application for CME credit will be filed with the AAFP. Determination of credit is pending.

Tentative Meeting Agenda*

Friday, January 25 (8 Credits)

- 7:00 am Registration (Magnolia Foyer)
- 7:00 – 8:45 Breakfast (Camellia A)
- 7:00 – 9:00 Exhibit & Poster Set-up (Camellia B)
- 8:00 - 3:30 Exhibits & Posters Open
- 5:30 - 7:00 Reception (Azalea D)

General Session (Camellia A)

- 8:00 – 10:00 CME
- 10:00 – 10:15 Break
- 10:15 – 12:15 CME
- 12:15 - 12:30 Break
- 12:30 – 1:30 Luncheon Lecture
- 1:30 – 1:45 Break
- 1:45 – 3:45 CME
- 3:45 – 4:00 Break
- 4:00 - 5:00 CME

Saturday, January 26 (8 Credits)

- 7:00 am Registration (Magnolia Foyer)
- 7:00 – 8:45 Breakfast (Camellia A)
- 8:00 - 3:00 Exhibits & Posters Open (Camellia B)

General Session (Camellia A)

- 8:00 – 10:00 CME
- 10:00 – 10:15 Break
- 10:15 – 12:15 CME
- 12:15 - 12:30 Break
- 12:30 – 1:30 Luncheon Lecture
- 1:30 – 1:45 Break
- 1:45 – 3:45 CME
- 3:45 – 4:00 Break
- 4:00 - 5:00 CME

Student/Resident Session (Azalea A,B)

- 8:00 – 8:45 Topic TBA
- 8:45 – 9:15 Topic TBA
- 9:15 – 10:00 Topic TBA
- 10:15 - 11:15 Topic TBA

Sunday, January 27 (4 Credits)

- 7:00 am Registration (Magnolia Foyer)
- 7:00 – 8:45 Breakfast (Camellia A)

General Session (Camellia A)

- 8:00 – 10:00 CME
- 10:15 – 10:30 Break
- 10:30 – 12:15 CME

*CME Topics are under construction and subject to change without prior notice.

2019 MOMA WINTER CME MEETING EXPO

January 25-26, 2019 ~ Beau Rivage Casino Hotel ~ 875 Beach Blvd ~ Biloxi, MS 39630

Company _____ Division _____
 Local Manager _____ Email _____
 Manager Mailing Address _____
 Phone _____ Fax _____ Mobile _____
 Authorizing or Attending Rep _____
 Representative Mailing Address _____
 Phone _____ Fax _____ Mobile _____
 List Attending Representatives _____

Exhibit and Sponsor Opportunities	Cost	Enclosed
Table-top Display – Standard 6’ with chair/wastebasket	\$750	
Student/Resident Poster Session Sponsor	\$1000	
CME Speaker Support (call to arrange)	\$1000	
Welcome Reception Sponsor (1 available)	\$1500	
Luncheon Sponsor (2 available)	\$1250	
Breakfast Sponsor (3 available)	\$1250	
Mid-Morning Break Sponsor (3 available)	\$750	
Afternoon Break Sponsor (2 available)	\$650	
Name Badge Sponsorship (1 available)	\$500	
APP Sponsorship (Linkage to your Display/Ad)	\$350	
Custom support package (call to arrange)	Variable	

TOTAL \$ _____

Attendance of 70+ medical professionals and 25-35 medical students is expected. Contact Ed Williams to discuss a customized assistance package involving three or more of the support options listed above.

Payment by Check: Check included Company Check to follow
Payment by Credit Card: MasterCard Visa American Express Discover
 Card # _____ Security Code _____ Expiration Date _____
 Statement Billing Address _____
 Authorized Name on Card _____ Signature _____

Fax Registration to: 601-675-4190

To Register Online: [Click Here](#)

**Mail Registration Form to:
MOMA
PO Box 110
Bienville, LA 71008**

MOMA is a 501(c)(6) non-profit organization. TIN# 64-0668464
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