



**2025
CME Conference
Best Foot Forward
Exhibitor Packet**

**May 30-June 1, 2025
Stonewall Resort
Roanoke, WV**

Welcome



Dear Exhibitor,

You are invited to join the West Virginia Podiatric Medical Association (WVPMA) for our annual CME Conference. This year's meeting will take place on Friday, Saturday and Sunday, May 30 to June 1, at Stonewall Resort in Roanoke, West Virginia. The meeting theme is "Best Foot Forward."

The fee for exhibiting all three days is \$750. We have other sponsor options that are listed elsewhere in this program.

Online conference sponsorship registration is available at the bottom of wvpma.net/events, and payment can be made through PayPal (by choosing the credit card option). Hotel reservations must be made by **April 25** by calling 888.278.8150 or 304.269.7400 and asking for the WVPMA room block. You can also make your room reservation [online](#). Rates are \$215 per room (king or two queens) including fees and include your sleeping room, onsite parking, in-park shuttle service, high speed internet access and Wi-Fi, use of fitness equipment, indoor/outdoor pool, sauna, steam room, paddle boats, canoes, kayaks, excursion boat, mountain bikes, basic fishing equipment and many other amenities. Please **call 888-278-8150 by April 25** and mention you are with WVPMA to get our special rate.

This year, we are including a variety of social events for everyone, so bring your family and friends to enjoy the fun. Lunch is available in Saturday and Sunday in Stillwaters Restaurant. Join us Friday from 6:00-8:00 p.m. for a welcome reception and Saturday from 5:00-7:00 p.m. for a second reception. After dark, make plans to visit the fire pit on the back patio.

Friday's activities will focus on Medicare A and B with speakers from Palmetto GBA. Topics Saturday and Sunday will focus on clinical topics for podiatrists in a variety of areas. You are welcome to sit in on sessions each day.

We will have opportunities for you to meet with podiatrists during social activities each evening, breakfast Saturday and Sunday, lunch Saturday and meeting breaks all three days. Continental breakfast, morning and afternoon breaks will take place in the exhibit hall area Friday, Saturday and Sunday. You may set up after 12:00 p.m. Friday and will need to be set up by 7:30 a.m. Saturday and you can close your booth after 11:00 a.m. Sunday.

We are asking you to participate in the program as an exhibitor, as a sponsor or by providing an educational session. Whether you choose to exhibit, sponsor or provide a session, we encourage you to take advantage of the opportunity to meet personally with podiatrist attendees during the weekend. Our attendees will have opportunities to spend quality time with you throughout the meeting.

I have enclosed an exhibitor application, conference schedule (which will be updated as needed) and W-9 for your convenience. The information also can be found at wvpma.net/events/. Payment should be made prior to the meeting by check or credit card.

We look forward to hearing from you by April 25, 2025, and thank you in advance for your support of the West Virginia Podiatric Medical Association. Please feel free to contact me at 304.984.0308 or info@wvpma.net if you have any questions.

Sincerely,

Diane Slaughter, APR, Fellow PRSA
Administrative Director

Our Agenda



Friday, May 30, 2025

1:00 - 5:00 pm	Check in/Registration Exhibits Open	Lower Foyer
3:00 - 4:00 pm	Medicare Part A and DPMs Jamela Hilary-Harris, MHRM, BBA, Palmetto GBA	Pecan Room
4:00 - 5:00 pm	Medicare Part B and DPMs Cecil Morrell III, Palmetto GBA	
5:00 - 6:00 pm	Clinical topics in Podiatry Chiquita Bandy, Palmetto GBA	
6:00 - 8:00 pm	Welcome Reception Sponsored by:	Lower Foyer

Dinner on your own

Saturday May 31, 2025

7:30 am	Continental Breakfast Sponsored by: Exhibits Open	Lower Foyer
8:00 - 9:30 am	Dr. Brad Hall WV Medical Professionals Health Program, Charleston	Pecan Room
9:30 - 10:00 am	Break with Exhibitors	Lower Foyer
10:00 - 11:00 am	Topic TBD Dr. Carrie Frame, WV Wound Institute, Charleston Sponsored by: <i>Organogenesis</i>	Pecan Room
11:00 - 12:00 pm	Updates on 3D Surgical Implants Dr. Michael Hurst, Davis Hospital, Elkins	
12:00 - 1:00 pm	Lunch with Exhibitors Annual Business Meeting	Maple Room
1:00 - 2:00 pm	Role of GLP-1 Agonists in Diabetes and Obesity Robin Elkins, NP, West Virginia University	Pecan Room
2:00 - 3:00 pm	Surgical topic TBD Dr. Seth Eberhardt, West Virginia University - East	
3:00 - 4:00 pm	WBC Tagged Bone and Marrow Scan and Osteomyelitis Dr. Xiaofei Wang, Chair, Advanced Imaging, Ruby Memorial Hospital, Morgantown	
4:00 - 5:00 pm	Current Treatment for Gout Dr. Christina Payne Sponsored by: <i>KRYSTEXXA</i>	
5:00 - 7:00 pm	Pre-Dinner Reception Sponsored by:	Lower Foyer

Dinner on your own or Little Sorrel

Sunday June 1, 2025

7:30 am	Continental Breakfast Sponsored by: Exhibits Open	Lower Foyer
8:00 - 9:00 am	Lower Extremity Vascular Surgery Dr. Matthew Cunningham-Hill, West Virginia University	Pecan Room
9:00 - 10:00 am	Prevention & Management of Diabetes and Amputation Dr. Ranjita Misra, WVU School of Public Health	
10:00 - 11:00 am	Regional Blocks Dr. Claire, West Virginia University	
11:00 - 12:00 pm	Status of Opioid Prescribing Dr. Kathryn Bosia, West Virginia University	
12:00 pm	Conference Adjourns	



2025 WV Podiatric Medical Association CME Conference Sponsorship Form

May 30-June 1, 2025 | Stonewall Resort, Roanoke, WV

Company Name

Contact Person

Address

City

State

Zip

Telephone

Email

Sponsorship opportunities:

- _____ **Speaker Sponsor** **\$3,000**

 - 10-minute talk in addition to speaker presentation
 - Logo on web site, conference marketing materials and brochure

- _____ **Reception Sponsor** **\$3,000**

 - Unrestricted time with attendees for one hour
 - 10- to 15-minute talk
 - Logo on web site, conference marketing materials and brochure

- _____ **Dry Lab Sponsor** **\$3,000**

 - 60-minute lab with podiatrists
 - Logo on web site, conference marketing materials and brochure

- _____ **Lunch Sponsor** **\$2,000**

 - 10-minute talk
 - Logo on web site, conference marketing materials and brochure

- _____ **Room key card sponsor** **\$1,500**

 - Your logo on attendee sleeping room key cards (WVPMA has contact information for provider)

- _____ **Continental Breakfast Sponsor** **\$1,000**

 - Logo on web site, conference marketing materials and brochure

- _____ **Exhibitor** **\$ 750**

 - 6” exhibit table with several times each day to visit conference attendees
 - Includes attendance at evening receptions, Saturday lunch, plus continental breakfasts
 - Logo on web site, conference marketing materials and brochure

- _____ **Refreshment Break** **\$ 750**

 - Includes attendance at evening receptions, Saturday lunch, plus continental breakfasts
 - Logo on web site, conference marketing materials and brochure

Please register online at <https://wvpma.net/events/> or return this form to WVPMA, address below, by April 25, 2025. Be sure to email a high resolution (300-dpi minimum) version of your company’s color logo and a link to your web site to info@wvpma.net.
Thank you for your continued support!

Application for Exhibit Space and/or Sponsorship

West Virginia Podiatric Medical Association
Stonewall Resort, Roanoke, WV
May 30-June 1, 2025
Due April 25, 2025

Name of company: _____

Name, title and address of person responsible for agreement:

Signature: _____ Date: _____

Cell number: _____ Email: _____

Name and type of products to be exhibited:

Representatives scheduled to work booth:

Name	Email	Cell Phone
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FEES and TERMS:

_____ Exhibit space	\$ 750/booth
_____ Break sponsor	\$ 750/each
_____ Breakfast sponsor	\$1000
_____ Room key card sponsor	\$1500
_____ Lunch sponsor	\$2000
_____ Speaker sponsor	\$3000
_____ Reception sponsor	\$3000
_____ Dry Lab sponsor	\$3000

Check made payable to the West Virginia Podiatric Medical Association is to be sent with completed application to WVPMA, PO Box 8035, South Charleston, WV 25303, or paid online at wvpma.net.

Exhibit space consists of one 6' skirted table and two chairs.

Tax identification number: 81-2906457.

Exhibit booth refunds will be given if written request is received by April 25, 2025. Refunds, less the \$50 processing fee, will be made after July 1, 2025, only if the space is resold. No refunds will be made for requests received after April 25, 2025.

Please contact Administrative Director Diane Slaughter, APR, Fellow PRSA with any questions: by phone, 304.984.0308; by e-mail, info@wvpma.net.

Send check and completed application to:

WV Podiatric Medical Association, PO Box 8035, South Charleston, WV 25303

Request for Taxpayer Identification Number and Certification

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

▶ Go to www.irs.gov/FormW9 for instructions and the latest information.

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

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) ▶ _____

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):
Exempt payee code (if any) 5
Exemption from FATCA reporting code (if any) _____
(Applies to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.) See instructions.
PO Box 8035

6 City, state, and ZIP code
South Charleston, WV 25303

7 List account number(s) here (optional)

Requester's name and address (optional)

Print or type.
See Specific Instructions on page 3.

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									
8	1	-	2	9	0	6	4	5	7

Part II Certification

Under penalties of perjury, I certify that:

- 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
- 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
- I am a U.S. citizen or other U.S. person (defined below); and
- 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 ▶ <i>Diane Slaughter</i>	Date ▶ January 10, 2025
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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.

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.



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South Charleston, WV 25303

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