



Share your latest technology in a hands-on setting...

NEW! this year – We are pleased to offer an exciting way to showcase leading-edge science through **Interactive Device Tutorials** at the Canadian Cardiovascular Congress. Don't miss this innovative opportunity to interact directly with cardiovascular health care professionals.

When preparing an Interactive Device Tutorial, consider that an effective session:

- is based on the needs of the participants;
- has learning objectives that are formulated from the needs assessment, written from the participants perspective, and describe what participants will learn or achieve;
- has high scientific merit;
- has relevant and timely topic and content;
- is balanced and objective;
- provides an opportunity for interaction and evaluation by participants (25%).

All Interactive Device Tutorials will take place in the Community Forum from Sunday to Tuesday, during regular Community Forum hours.

Guidelines

- An Interactive Device Tutorial is limited to a maximum of 30 participants in a classroom setting, and lasts up to 1 hour.
- You must be an exhibitor at CCC in order to host an Interactive Device Tutorial.
- Costs for audio-visual equipment, food and beverage, and other related charges are the responsibility of the host. Hosts are required to use the official CCC 2010 audio-visual supplier.
- All CCC 2010 Interactive Device Tutorials will take place within the Community Forum.
- All speakers must register for CCC and pay all applicable fees.
- Interactive Device Tutorials will not be published in the Final Program or any other document related to science and presented at CCC.

Fees

The fee for hosting an Interactive Device Tutorial at CCC is \$5,000 (plus applicable taxes). Once your Interactive Device Tutorial application has been received, an invoice will be issued and is payable prior to the CCC.

Contact Information

NOTE: Applications accepted on a "first-come, first-served" basis. Call to review available time slots.

Name _____

Title _____

Organization _____

Address _____

City _____ Province/State _____ Country _____ Postal/Zip Code _____

Telephone _____ Facsimile _____ E-mail _____

Authorized Signature _____ Date _____

(use the digital signature generated within Acrobat to sign this form)

**Please complete this form and fax or e-mail it to: Blair Tryon
Director, Congress Operations
Fax: (613) 236-2727
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