



Society of Accredited Marine Surveyors®

2025 IMEC

(INTERNATIONAL MARINE EDUCATIONAL CONFERENCE)

Baltimore, MD

September 9th – September 12th, 2025

EXHIBITOR REGISTRATION

(Please register by August 11, 2025)

Company Name: _____

Contact Name: _____

Guest: _____

Guest: _____

Address: _____

Telephone: _____ Email: _____

Website Address: _____

A display area for exhibitors will be available outside the conference room.

Set-up will be at 8 a.m. on Wednesday and end on Friday. There will be NO FEE for exhibitor booth space for the three days of displaying.

Please contact Tobi Solaja at tobi.solaja@hyatt.com to reserve your table and chairs.

Exhibitors who plan to attend SAMS® Educational Programs must register as both

Exhibitor and Attendee of the SAMS® Educational Seminar.

Those wishing to attend SAMS® Educational Seminars must use the SAMS® International Meeting & Educational Conference Registration Form. Please contact SAMS® International Office if a registration form or additional details are needed.

Please see reverse side for more information

**You are invited to attend Wednesday's President's Reception and
Thursday's Gala Dinner.**

1) The President's Reception - Tuesday Evening, September 9th

Do you plan on attending the President's Reception?

Yes _____ No _____ Number Attending _____

2) Gala Dinner - Wednesday Evening, September 10th

Do you plan on attending the Gala Dinner?

Yes _____ No _____ Number attending _____

Dinner Selection:

_____ **Braised Short Ribs:** Potatoes, Roasted Root Veg., Swiss Chard, Pale Ale Infused Demi-Glace.

_____ **Seared Chicken Breast:** Rosemary Fingerling Potatoes, Brussel Sprouts, Roasted Mushroom & Shallot Jus.

_____ **Chesapeake Style Jumbo Lump Crab Cake:** Heirloom White Corn Garlic Herb Polenta, Grilled Broccolini.

_____ **Spinach and Wild Mushroom Risotto:** Caramelized Onions, Spinach, Parmesan.

Please list any special dietary needs/allergies: _____

**The cost for each event (per person) is \$87.50 if received by August 1, 2025.
\$100.00 if received by August 22, 2025.**

Type of Payment: Check ☐ Money Order ☐ Visa ☐ MasterCard ☐ Discover ☐

PayPal (SAMS® Website) ☐ Total: _____

**Please note: All Credit Card and PayPal payments will be charged a 4% Convenience Fee
and may be called into the International Office**

Account #: _____ - _____ - _____ - _____

Expiration Date: _____ Code on Back of Card: _____

If you have any questions, please contact:

SAMS® International Office
7855 Argyle Forest Blvd., Suite 203
Jacksonville, FL 32244
Phone: (800) 344-9077 Fax: (904) 388-3958

samshq@marinesurvey.org

Return this form and your payment to SAMS® International Office