

APPLICATION AND CONTRACT FOR EXHIBIT SPACE

2026 Annual Clinical and Scientific Meeting (ACSM)

Meeting Dates: May 1-3, 2026

Exhibit Dates: May 1-2, 2026

Walter E. Washington Convention Center | Washington, DC



Contact Information (English Only)

Company Name

Contact Job Title

Tel (direct only) Mobile (required)

Email (direct only) Website

Address

City State Zip Country

Is this your company's first time exhibiting at ACOG ACSM? ☐ Yes ☐ No ☐ Unsure

Product(s) | Service(s) Promoting at ACSM (please list):

If eligible, FDA-approved: ☐ Yes ☐ No

Exhibit Space

☐ Standard Space – \$43.00 per sq. ft. ☐ Corner Fee – \$350 per corner ☐ Island Fee – \$46.00 per sq. ft. (No Corner Fee)

Booth Size: (min. 10' x 10') Booth Preferences: 1st 2nd 3rd

Additional Opportunities

☐ Featured Exhibitor Listing Upgrade - \$900

Total Cost (including Additional opportunities): \$

Payment Information & Cancellation Penalties

Deposit and Payment Schedule:

August 13, 2025: 50% Due for All Applications

August 13, 2025 – January 16, 2026: 50% Due Upon Receipt

After January 16, 2026: 100% Due for All Applications

Applications received after due date are "due upon receipt," and must be brought up to date to most recent payment deadline. If Exhibitor fails to pay either 50% Deposit or final 100% Balance by due dates listed above, ACOG may cancel Exhibitor's participation per penalty schedule. ACOG is free to assign released space to other companies. Cancellation does not release Exhibitor from obligation per penalty schedule.

Cancellation Penalties:

Through August 12, 2025: 0% Penalty

August 13, 2025 – January 16, 2026: 50% Penalty

After January 16, 2026: 100% Penalty

Submit application to: Email: acogexhibits@spargoinc.com

Need Help? Contact: acogexhibits@spargoinc.com

703-631-6200 | 800-564-4220

Make checks payable to:

American College of Obstetricians and Gynecologists

Mail check payment to:

ACOG Exposition Management, c/o SPARGO, Inc.

11208 Waples Mill Road, Suite 112 • Fairfax, VA 22030

Credit Card Payments:

An invoice will be sent with instructions to submit credit card payment online.

First time exhibiting, how did you hear about us?

- ☐ Social media (Facebook, Instagram, LinkedIn, X)
- ☐ Search engine (Google, Bing, etc.)
- ☐ Online ad
- ☐ Word of mouth/referral
- ☐ Email
- ☐ Industry event/conference
- ☐ Other (please specify) _____

I acknowledge that, as an authorized representative of the above stated Exhibitor, I have received, reviewed, and agree that Exhibitor will comply with the [Rules and Regulations](#). Exhibitor will comply with all updates of such policies applicable to the ACOG ACSM. Exhibitor agrees to receive all written and electronic correspondence from ACOG, SPARGO, Inc. and official event contractors in reference to ACSM and all future ACOG events. This exhibit space application will become a contract upon Exhibitor's authorized signature and ACOG's acceptance and approval.

Exhibitor Signature..... Date.....

Printed Name..... Telephone.....

