

APPLICATION AND CONTRACT FOR PRE/POST-SHOW REGISTRATION MAIL LIST

ADLM 2025

Meeting Dates: July 27 – July 31, 2025
 Exhibit Dates: July 29 – July 31, 2025
 McCormick Place | Chicago, IL



Contact Information (English Only)

Company Name

Contact Job Title

Tel (direct only) Mobile

Email (direct only) Website

Address

City State Zip Country

Terms and Conditions: As an exhibitor you may order a registrant list for the ADLM Association for Diagnostics & Laboratory Medicine. Use of the mailing list is meant to facilitate your company's pre-show and post-show marketing efforts. **This License Agreement allows for a one time use of the list. A copy of the mailing material must be sent for approval (electronic file can be submitted via email).** The Excel file may not be reproduced or distributed to any other organization, individual or institution without the expressed written consent of SPARGO, Inc. and ADLM. The lists will contain approximately 4,000 names, including "Conference" and "Expo Only" registrants and will include individuals from IVD companies, consultants, and others, along with registrants from clinical labs. No Exhibitors are included unless the individual is also a paid conference registrant. This is a mail list only - no phone, fax, or email addresses are included. The pre-list will be sent via email in Excel format in mid-June 2025, and the post-list will be sent in mid-August 2025. Both are opt in/opt out and some attendees may choose not to participate. This offer is available to contracted 2025 exhibitors only.

_____ Pre-Show List(s) ordered at \$1,500 per list

_____ Post-Show List(s) ordered at \$2,000 per list

Send sample draft of the mailing piece to Terri Landis:
terri.landis@spargoinc.com / 703-679-3906

Total Cost: \$ _____

Payment Information

Deposit and Payment Schedule
September 25, 2024...50% due for applications submitted prior to September 25, 2024
September 25, 2024 – April 1, 2025...50% due with application
After April 1, 2025...100% due with application

ADLM requires payment in full no later than April 2, 2025. Failure to make payments does not release the contracted or financial obligation of Exhibitor.

Submit application to:
 Email: exhibitcontracts@spargoinc.com

Need Help? Contact:
adlmexhibits@spargoinc.com
 703-631-6200 | 800-564-4220

Cancellation Penalties

Cancellation Penalties
Through September 24, 2024 - 0%
September 25, 2024 – April 1, 2025 - 50%
After April 1, 2025 - 100%

Make checks payable to:
 Association for Diagnostics & Laboratory Medicine

Mail check payment to:
 xx4307- Exhibit
 Association for Diagnostics & Laboratory Medicine
 P.O. Box 6003
 McLean, VA 22106

Please Overnight Checks to:
 Association for Diagnostics & Laboratory Medicine Exposition Mgmt.
 c/o SPARGO, Inc.
 11208 Waples Mill Road, Suite 112 ♦ Fairfax, VA 22030

Credit Card Payments:
 An invoice will be sent via email with instructions to submit credit card payment online. A 3% non-refundable processing fee will be added to all credit card payments.

I acknowledge that, as an authorized representative of the above stated Exhibitor, I have received, reviewed, and agree that Exhibitor will comply with the *ADLM 2025 Exhibit Terms, Conditions, Rules and Regulations*. Exhibitor agrees to receive all written and electronic correspondence from ADLM, SPARGO, Inc. and official event contractors in reference to ADLM 2025 and all future ADLM events. This mailing list application will become a contract upon Exhibitor's authorized signature and ADLM's acceptance and approval.

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

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