AORN GLOBAL SURGICAL CONFERENCE & EXPO | 2020 Advertising Order Form

Fill out the form below and email to Advertisinginfo@aorn.org or call 800-755-2676, ext. 280 with any questions or requests for additional details. Once the form is received, a confirmation will be sent back along with any additional information that may be needed.

Invoices will be sent within 1-2 weeks from order date and all payments are due on or before March 15, 2020.

BILLING INFORMATION

Company Name: _____

Booth Number: _____

Billing Address: _____

Billing Contact: _____

PO#: _____

Order/Materials Contact: _____

Phone Number: _____

Email: _____

PAYMENT OPTIONS

☐ Invoice me at the address above

☐ Credit Card (AORN will send credit card form via email for payment)

TOTAL AMOUNT DUE: $_____

ADVERTISEMENT OPTIONS

CONFERENCE PROGRAM

☐ Inside Cover $_____

☐ Page $_____

☐ Tab $_____

☐ Full page $_____

☐ Half page $_____

☐ Full page tear-out $_____

☐ Two-panel fold out $_____

CONFERENCE MOBILE APP

☐ Banner Ad
(10 spots available) $_____

☐ Full Screen Ad
(4 spots available) $_____

EXECUTIVE LEADERSHIP SUMMIT PROGRAM

☐ Back Cover $_____

☐ Inside Back Cover $_____

☐ Inside Front Cover $_____

☐ Full page $_____

☐ Belly Band $_____

BANNER ON AORN.ORG

☐ Expo home page $_____

☐ **ATTENDEE BAG INSERT** $_____

EXPO DAILY NEWS (printed)

☐ Back Cover

☐ Inside Back Cover $_____

☐ Full Page $_____

☐ Half page $_____

☐ Quarter page $_____

EXPO DAILY NEWS (digital)

☐ Top 320x100
(1 spot available) $_____

☐ Side 250x250
(4 spots available) $_____

☐ In-Text 320x100
(3 spots available) $_____

BOOTH TRAFFIC PROGRAM

☐ **EXPO QUEST** $_____

ATTENDEE LISTS

EMAIL BLAST

☐ Pre Blast $_____ Date requested _____

☐ Post Blast $_____ Date requested _____

DIRECT MAIL LIST

☐ Pre List $_____ Date requested _____

☐ Post List $_____ Date requested _____

First list is available February 22 and is updated and available each Friday thereafter.

Email a sample of the piece being mailed to AORN (Advertising info@aorn.org) prior to the date requested. Sample is needed before AORN can send the list.

I agree that I am using the AORN mailing list, one time only, solely for promotion and follow up regarding my company's participation in the Surgical Conference & Expo 2020. I agree my company will not assert or imply AORN endorsement of company's products or services. I understand that lists will be purged of duplicates. I understand that all lists are seeded with decoy names to detect unauthorized usage. I understand that reproduction of, copying, or duplicating the list in any way for any other purpose is strictly prohibited. I understand and agree that the AORN Surgical Conference & Expo 2020 list is not to be used for, or to recruit for, market research purposes. Violation of this agreement will suspend my list rental privileges indefinitely. AORN may in its sole discretion, for any or no reason, cancel or refuse any rental request.

Signature: _____

ON-SITE OPTIONS

Please contact Advertisinginfo@aorn.org or 800-755-2676, ext. 280 to order the following items:

- Floor Stickers
- Table Clings
- Charging Station
- Column Wrap
- Escalator Runner
- Door/Window Cling
- Lobby Hanging Banner
- Hotel Key Cards
- "Billboard" signs
- Signage Cube
- Hotel Options
- Any other additional on-site options

DETAILS

☐ _____

_____

_____ $ _____

☐ _____

_____

_____ $ _____