

APPLICATION AND CONTRACT FOR EXHIBIT SPACE

CellBio 2020

Meeting Dates: December 5-9, 2020
 Exhibit Dates: December 5-7, 2020
 Pennsylvania Convention Center – Philadelphia, PA

Submit Via Email



Contact Information

Company Name.....
 Contact..... Title.....
 Tel..... Fax.....
 Email..... Web Site

Address.....
 City..... State..... Zip..... Country.....
 How did you hear about this meeting?

Exhibit Space

- Inline Booth - **\$35.00 per sq. ft.** (min. 10'x10') **Size:** _____ x _____ **Total Cost:** \$ _____
- Corner Booth - **\$38.00 per sq. ft.** (min. 10'x10')
- Island Booth – **\$38.00 per sq. ft.** (min. 20'x20') **Preferences:** 1st _____ 2nd _____ 3rd _____
- Interactive Conference Booth (allows presentations within booth, furnishings not included) – **\$37.00 per sq. ft.** (min. 20'x30')
- Non-Profit Booth (for approved organizations) - **\$30.00 per sq. ft.** (min. 10'x10')

Payment Information

Initials	Deposit and Payment Schedule
	February 6, 2020...50% due for applications submitted prior to February 6, 2020
	February 6, 2020 – August 7, 2020...50% due with application
	After August 7, 2020...100% due with application

ASCB requires full payment no later than August 8, 2020. Failure to make payments does not release the contracted or financial obligation of Exhibitor.

Cancellation Penalties	Initials
Through February 5, 2020...0%	
February 6, 2020 – August 7, 2020...50%	
After August 7, 2020...100%	

Make checks payable to:
 ASCB – American Society for Cell Biology

Mail check payments to:
 ASCB Exhibits Management
 c/o SPARGO, Inc.
 11208 Waples Mill Rd., Suite 112
 Fairfax, VA 22030

Credit Card Payments:
 An invoice will be sent within one business day with instructions to submit credit card payment online.

Submit application via Email:
exhibitcontracts@spargoinc.com

ACH Remittance:
 SunTrust Account Name: American Society for Cell Biology
 SunTrust Account Number: 1000091141563
 Routing Number: 061000104
 SunTrust Bank | One Park Place | Atlanta, GA 30303

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

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 CellBio 2020. Exhibitor agrees to receive all written and electronic correspondence from ASCB, SPARGO, Inc., and official event contractors in reference to CellBio, and all future ASCB events and opportunities. This exhibit space application will become a contract upon Exhibitor's authorized signature and ASCB's acceptance and approval.

Exhibitor Signature..... Date.....
 Printed Name..... Telephone.....

Show Management Use

Authorized ASCB Signature..... Date.....
 Account Number..... Assigned Booth Number..... Size.....