

# TLC Convention Plant Services



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Web Site: [WWW.TLCCCONVENTIONPLANTS.COM](http://WWW.TLCCCONVENTIONPLANTS.COM)

**NOTE: Advanced pricing deadline is Tuesday, April 28, 2026**

SHOW NAME 2026 ASCO® Annual Meeting  
DATE May 29-June 2, 2026  
LOCATION McCormick Place, Chicago



WE WOULD LIKE TO ORDER THE FOLLOWING ITEMS FOR OUR EXHIBIT:

QUANTITY	ITEM / DESCRIPTION	UNIT PRICE	TOTAL PRICE
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HAVE A TLC DESIGNER CALL OUR BOOTH AT SHOW SITE		DATE: _____	TIME: _____
Small Flower Arrangements		\$85.00	_____
Medium Flower arrangements		\$95.00	_____
Custom designed arrangements Starting at \$100.00-\$300.00			
Size _____	Height _____	Color _____	
6" Tabletop (circle one: (SPATH, CROTON))		\$24.00	_____
Azaleas (preferred color: (if available _____))		\$38.00	_____
Mums (circle one: white yellow bronze lavender		\$28.00	_____
Large Fern		\$40.00	_____
Ivies		\$40.00	_____
Bromeliads		\$40.00	_____
2 foot green plants		\$45.00	_____
3 foot green plants		\$50.00	_____
4 foot green plants		\$60.00	_____
5 foot green plants		\$70.00	_____
6 foot green plants		\$80.00	_____
7 and 8 foot green plants		\$100.00	_____
8 foot & up...priced upon request			_____
<b>Containers – (Black), (White), (Wicker)</b>		<b>SUB TOTAL</b>	_____
Brass and other containers available		<b>6.5% SALES TAX</b>	_____
Please call for pricing		<b>DELIVERY FEE</b>	<b>\$20.00</b>
		<b>TOTAL</b>	_____

# FLORAL ORDER FORM

Rental price includes: container, top dressing, maintenance, installation and pick up. ALL ORDERS MUST BE PAID-IN-FULL PRIOR TO SHOW OPENING. We accept cash, company check, DINERS CLUB, VISA, MASTER CARD, AMERICAN EXPRESS. *Adjustments cannot be made after the close of the show.* A 100% cancellation fee will be charged on all orders canceled.

Exhibitor Name:

**BOOTH NO#**

1. **What is the primary purpose of the following statement?**

Firm Billing Name:

10.1007/s00332-007-0332-2

Firm Billing Address: \_\_\_\_\_ City: \_\_\_\_\_

State Zip

Credit Card Address: \_\_\_\_\_ City: \_\_\_\_\_

State Zip

Contact Name: **PO#**

Phone:

Email Address:

Credit Card: American Express / Visa / MasterCard

CIP

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

Name on Credit Card: