

APPLICATION AND CONTRACT FOR TABLETOP EXHIBIT



2024 Highlights of ASH® in North America

Seattle, WA | Chicago, IL | Washington, DC | New York, NY

Submit application no later than December 15, 2023 to:

exhibitcontracts@spargoinc.com

Contact Information

Company Name (used for all recognition).....
Contact..... Job Title.....
Tel (direct)..... Mobile.....
Email (direct)..... Web Site
Address.....
City..... State..... Zip..... Country.....

Exhibitor Opportunities

Includes six-foot tabletop, two chairs, wastebasket, company description provided to meeting attendees, Tier #3 Priority Points, and three complimentary badges.

All Four Meeting Venues - \$44,000

- January 12-13, 2024 | Fairmont Olympic | Seattle, WA - \$11,000
January 19-20, 2024 | Omni Shoreham | Washington, DC - \$11,000
January 19-20, 2024 | Fairmont Chicago | Chicago, IL - \$11,000
January 26-27, 2024 | Conrad New York | New York, NY - \$11,000

Total Cost:

\$ _____

Payment Information

Table with 2 columns: Deposit and Payment Schedule. Row 1: Payment in full due with application. Row 2: Exhibitors must submit full payment with application. Failure to make payments does not release the contracted or financial obligation of Exhibitor.

Submit application to:

Email: exhibitcontracts@spargoinc.com

Need Help? Contact:

ashexhibits@spargoinc.com
703-631-6200 | 800-564-4220

Cancellation Penalties

Table with 2 columns: Cancellation Penalties. Row 1: 100% cancellation penalty

Make checks payable to: ASH (Reference Invoice Number on check)
ASH Tax ID: 23-7080568

Mail check payment to:
American Society of Hematology – HOA Exhibits
P.O. Box 70705 • Philadelphia, PA 19176-0705

Overnight check payment to:
American Society of Hematology - Box 70705 – HOA Exhibits
Attn: Box 70705
400 White Clay Center Drive • Newark, DE 19711
Tel: 202-776-0544

Credit Card Payments:

An invoice will be sent via email with instructions to submit a credit card payment online. A 3.5% nonrefundable 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 Rules and Regulations. Failure to adhere to these guidelines will result in denial of future participation. Exhibitor agrees to receive all written and electronic correspondence from ASH, SPARGO, Inc. and official event contractors in reference to the Highlights of ASH and all future ASH events. This tabletop exhibit application will become a contract upon Exhibitor's authorized signature and ASH's acceptance and approval.

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

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