APPLICATION AND CONTRACT FOR TABLETOP EXHIBIT

2026 Highlights of ASH® in North America

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

Submit application no later than December 12, 2025 to:

ashexhibits@spargoinc.com



Contact Information		
Company Name (used for all recognition)		
Contact		
Tel (direct)		
Email (direct)	Web Site	
Address		
City State	ZipCountry	
Exhibitor Opportunities Includes six-foot tabletop, two chairs, wastebasket, company description provided to meeting attendees, Tier #3 Priority Points, three complimentary badges, and attendee list for each location of exhibit(s). □ All Four Meeting Venues - \$48,000 □ January 9-10, 2026 Conrad New York Downtown New York, NY - \$12,000 □ January 9-10, 2026 Hyatt Centric Chicago Magnificent Mile Chicago, IL - \$12,000 □ January 16-17, 2026 Omni Shoreham Washington, DC - \$12,000 □ January 30-31, 2026 Fairmont Olympic Seattle, WA - \$12,000		
Payment Information	Cancellation Penalties	
Deposit and Payment Schedule	Cancellation Penalties	
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Payment in full due with application

Exhibitors must submit full payment with application. Failure to make payments does not release the contracted or financial obligation of Exhibitor. A late fee of 5% will be assessed on amounts past due by over 30 days.

Submit application to:

Email: ashexhibits@spargoinc.com

Need Help? Contact:

<u>ashexhibits@spargoinc.com</u> 703-631-6200 | 800-564-4220 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 <i>Rules and Regulations</i> . 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