

APPLICATION AND CONTRACT FOR EXHIBIT SPACE

ASRM 2019 Annual Scientific Congress & Expo

Meeting Dates: October 12-16, 2019

Exhibit Dates: October 14-16, 2019

Pennsylvania Convention Center ~ Philadelphia, PA

[Click Here to Submit Via Email](#)



Contact Information (English Only)

Company Name.....

Contact..... Title.....

Tel..... Email..... Website.....

Address.....

City..... State..... Zip..... Country.....

Exhibit Space

Inline Space – \$44.00 per sq. ft. Island Space – \$48.00 per sq. ft. Size: _____ (min. 10' x 10')

Preferences: 1st _____ 2nd _____ 3rd _____ Exhibit Space Cost: \$ _____

Premium Listing Upgrade

Premium Listing Standard Rate - \$875

Exhibit Space Total \$ _____ + Listing Upgrade Total \$ _____ = **Total Cost \$** _____

Payment Information

| Initials | Deposit and Payment Schedule |
|----------|---|
| | March 19, 2019...50% due for applications submitted prior to March 19, 2019 |
| | March 19, 2019 – June 11, 2019...50% due with application |
| | After June 11, 2019...100% due with application |

ASRM requires payment in full no later than June 12, 2019. Failure to make payments does not release the contracted or financial obligation of Exhibitor.

Submit application to:
Email: exhibitcontracts@spargoinc.com

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

Cancellation Penalties

| Cancellation Penalties | Initials |
|--------------------------------------|----------|
| Through March 18, 2019 - 0% | |
| March 19, 2019 – June 11, 2019 - 50% | |
| After June 11, 2019 - 100% | |

Make checks payable to:
American Society for Reproductive Medicine

Mail check payment to:
ASRM Exposition Management, c/o SPARGO, Inc.
11208 Waples Mill Road, Suite 112 ♦ Fairfax, VA 22030

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

I acknowledge that, as an authorized representative of the above stated Exhibitor, I have received, reviewed, and agree that Exhibitor will comply with the [ASRM 2019 Scientific Congress & Expo Exhibitor Rules and Regulations](#). Exhibitor agrees to receive all written and electronic correspondence from ASRM, SPARGO, Inc. and official event contractors in reference to the ASRM 2019 Scientific Congress & Expo and all future ASRM events. This exhibit space application will become a contract upon Exhibitor's authorized signature and ASRM's acceptance and approval.

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

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

Show Management Use

Authorized ASRM Signature..... Date.....

Account Number..... Assigned Booth Number..... Size.....