

APPLICATION AND CONTRACT FOR EXHIBIT



66th ASH Annual Meeting & Exposition

Meeting Dates: December 7-10, 2024
Exhibit Dates: December 7-9, 2024
San Diego Convention Center | San Diego, CA

Submit application to:
exhibitcontracts@spargoinc.com

Contact Information

Company Name.....
Contact..... Title.....
Tel (direct)..... Mobile (required).....
Email (direct)..... Web Site .....
Address.....
City..... State..... Zip..... Country.....

Exhibitor Opportunities

In-person Exhibit

Island Space - \$114.00 per sq. ft. Inline Space - \$102.00 per sq. ft. Inline Corner Premium - \$650 per open corner

Size: (min. 10' x 10') Preferences: 1st 2nd 3rd Booth Cost: \$

Virtual Exhibit

\$25,000

Total Cost of All Items: \$

We are interested in Support Opportunities We are interested in Exhibitor Meeting Rooms
(Show Management will contact you with application and contract)

Payment Information

Table with 2 columns: Deposit and Payment Schedule. Rows include: February 1, 2024...50% due for applications submitted prior to February 1, 2024; February 1, 2024 - June 3, 2024...50% due with application; After June 3, 2024...100% due with application. ASH requires payment in full no later than June 4, 2024.

Cancellation Penalties

Table with 2 columns: Cancellation Penalties. Rows include: Through January 31, 2024...0%; February 1, 2024 - June 3, 2024...50%; After June 3, 2024...100%

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

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

Overnight check payment to:
American Society of Hematology - Box 70705 - Exhibits
Attn: Box 70705
400 White Clay Center Drive ♦ Newark, DE 19711

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.

Submit application to:
Email: exhibitcontracts@spargoinc.com

Need Help? Contact:
ashexhibits@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 agrees to receive all written and electronic correspondence from ASH, SPARGO, Inc. and official event contractors in reference to the ASH annual meeting and all future ASH events.

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