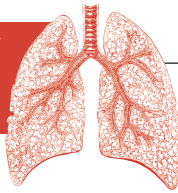


MULTIDISCIPLINARY THORACIC CANCERS SYMPOSIUM



EMERGING INNOVATIONS AND NEW ADVANCEMENTS
FAIRMONT SCOTTSDALE PRINCESS
SCOTTSDALE, ARIZONA | DECEMBER 2-4, 2021

EXHIBITOR APPLICATION

All meetings, exhibits and activities conducted in conjunction with the Thoracic Cancers Symposium will be required to adhere to hotel and state COVID-19 safety guidelines. Reduced capacity, mask wearing and social distancing may apply.

TABLETOP EXHIBIT: \$4,500 per space

This includes:

- One 6 foot table with two chairs
- Participation to the Passport to Prizes Program
- Two exhibitor staff registrations*
- Postshow Attendee List (must sign agreement below to receive)

**Registration for exhibitor booth personnel is required. Space rate includes two complimentary exhibitor registrations for each tabletop exhibit. Additional exhibitor registrations are available for purchase.*

PRESHOW MAILING LIST: \$500 (In Excel file format)

All orders require a sample of the printed material to be mailed to be submitted via email to shirley.harris@spargoinc.com. **WE CANNOT PROCESS YOUR ORDER UNTIL WE RECEIVE THIS SAMPLE.** *Note:* All orders will be processed no sooner than four weeks prior to the meeting. Exhibitor must use a GDPR compliant mail house.

CONTACT INFORMATION

Only the designated contact as provided below will receive all exhibit-related materials.

Company		DBA (If different from company name)	
Contact Person		Title	
Street			
City	State	Zip	Country
Phone		Email	

HAS YOUR COMPANY EXHIBITED WITH ASTRO BEFORE? YES NO

REASON FOR EXHIBITING: _____

COMPANY PRODUCT

Please indicate the category that describes your company's product best. (More than one may be selected.)

- | | | | |
|---|--|---|---|
| <input type="checkbox"/> Brachytherapy | <input type="checkbox"/> Device/Equipment | <input type="checkbox"/> EMR/Data Management/IT | <input type="checkbox"/> Facility Construction/Design |
| <input type="checkbox"/> Financial/Insurance | <input type="checkbox"/> Imaging/Diagnostics | <input type="checkbox"/> Practice Management | <input type="checkbox"/> Pharmaceutical |
| <input type="checkbox"/> Recruitment and Staffing | <input type="checkbox"/> Treatment Planning | <input type="checkbox"/> Other _____ | |

TABLETOP EXHIBIT LOCATION

Tabletop exhibits are assigned on a first-come, first-served basis with preference being given to meeting supporters. While every effort will be made to honor your specific request, we are unable to guarantee your request.

Top three desired tabletop exhibit numbers, in order of preference: 1. _____ 2. _____ 3. _____

INSURANCE

Further, Exhibitor understands that by entering into this binding contract with ASTRO that Exhibitor must procure valid insurance in accordance with the term, limits and specifications as set forth in the 2021 Multidisciplinary Thoracic Cancers Symposium Exhibitor Rules, Regulations and Policies that will be available online at www.thoracicsymposium.org.

Initial: _____ Date: _____

TABLETOP EXHIBIT ACKNOWLEDGEMENT

As an authorized representative of the above stated Exhibitor, I have received and reviewed the 2021 Multidisciplinary Thoracic Cancers Symposium Exhibitor Prospectus and the 2021 Multidisciplinary Thoracic Cancers Symposium Exhibitor Rules, Regulations and Policies available online at www.thoracicsymposium.org hereinafter referred to as "2021 Thoracic Symposium Exhibitor Rules." Exhibitor agrees to comply with the 2021 Thoracic Symposium Exhibitor Rules which are incorporated herein by reference and made part of this contract (as existing on the date hereof and as the same may be amended or changed). In the event of any change in the 2021 Thoracic Symposium Exhibitor Rules, the most up-to-date versions, available online at www.thoracicsymposium.org, will be controlling.

I agree and understand that the contact information provided on this Application and Contract for Exhibit Space will be shared with other organizations assisting with the 2021 Multidisciplinary Thoracic Cancers Symposium and other ASTRO initiatives. Exhibitor agrees to receive all written and electronic correspondence from ASTRO and SPARGO, Inc., in reference to the 2021 Multidisciplinary Thoracic Cancers Symposium and all future ASTRO events.

The parties hereto agree that upon Exhibitor's authorized signature and ASTRO's acceptance and approval, this Application and Contract for Exhibit Space, together with the 2021 Thoracic Symposium Exhibitor Rules, will constitute a legal and binding contract between exhibitor and ASTRO enforceable in accordance with its terms.

Exhibitor Signature: _____ Date: _____

Printed Name: _____ Telephone: _____

ATTENDEE LIST LICENSE AGREEMENT

Must complete for pre and post show attendee list.

I (We) understand and agree that this list order is for a one-time use only and is to be used only to send material herewith submitted for review by ASTRO. I (We) also agree not to duplicate, disseminate, reuse, transfer or reproduce the ASTRO mailing list, labels or e-file, or any of the information therein (collectively "Mailing List Information"), in any form whatsoever. I (We) will ensure that all members of our organization, including but not limited to, all volunteers, employees, contractors or other affiliated parties, are aware of and abide by these terms and will maintain the security of this information in accordance with industry standards, will comply with any applicable privacy laws including fulfilling data access and deletion requests, and will delete the Mailing List Information after our one-time use. If I (We) plan to share any of the Mailing List Information with a third party, such as a mail house, I (We) will require that third party agree to the terms herein and sign the Third Party Addendum provided by ASTRO for this purpose, prior to sharing any Mailing List Information with them. I (We) have indicated below the name(s) of the mail house and/or other third party(ies) we will use. I (we) understand that I (we) are only authorized to use Mailing List Information once. A separate order form must be submitted and approved before using the Mailing List Information again. If unauthorized use is detected, I (we) understand that I (we) will be prosecuted to the full extent of the law. This agreement shall be construed and governed in accordance with the laws of the Commonwealth of Virginia. I (We) expressly consent to an injunction in the event of breach of this licensing agreement and to the exclusive jurisdiction of the federal and state courts in Fairfax County, Virginia, for any dispute concerning this licensing agreement. I (We) agree to pay reasonable attorney's fees incurred by ASTRO as a result of any breach of this licensing agreement.

Signature (REQUIRED)	Print Name
Mail House Signature (REQUIRED IF ONE WILL BE USED)	Print Mail House Name
	Mail House Email

I **intend** to use a mail house/third party. Yes No

Check here if you **do not** plan to send out a mailing using the Preshow Mailing Attendee List.

ASTRO APPROVAL (For ASTRO Use Only)

Application Accepted by:

CHECK PAYMENT

If paying by check, please email Application and Contract for Exhibit Space to exhibitcontracts@spargo.com. Please mail original application with check made payable to ASTRO to:

For Standard Mail:
ASTRO
P.O. Box 417217
Boston, MA 02241-7217

For Overnight Delivery:
Bank of America Merrill Lynch Lockbox Services
Lockbox #417217, MA5-527-02-07
2 Morrissey Blvd., Dorchester, MA 02125

CREDIT CARD PAYMENT:

Credit card payment can only be accepted via phone at 703-631-6200 or 1-800-564-4420 or online. You will receive instructions upon invoicing with a log in to your account to pay online.

CANCELLATION POLICY:

100% of the total space rental fee will be retained for cancellations. All cancellations must be made in writing.

Please submit your completed application to exhibitcontracts@spargo.com.

