

# MARKETING & INDUSTRY SUPPORTER AGREEMENT



# DIA 2019

# GLOBAL ANNUAL MEETING

JUNE 23-27 | SAN DIEGO | #DIA2019

## Contact Information

Company Name \_\_\_\_\_

Contact \_\_\_\_\_ Title \_\_\_\_\_

Tel \_\_\_\_\_ Fax \_\_\_\_\_

Email \_\_\_\_\_ Web Site \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Country \_\_\_\_\_

## Support Opportunities

Name of Support Opportunity: \_\_\_\_\_

Total Cost of Support Opportunity: \$ \_\_\_\_\_

*Support Opportunity parameters are illustrated in accompanying prospectus. Promotional materials and giveaways to be distributed at hosted events must be approved by show management prior to production. Production, shipping and drayage costs are not included in opportunity fees. Support commitments made after May 13, 2019 may incur additional fees to cover the costs of late production charges. Support Opportunities are offered on a first right of refusal basis to incumbent exhibitors through November 2, 2018, then available on a first-come, first-served basis.*

**Special requests/Notes:** \_\_\_\_\_

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## Payment and Cancellation Information

<b>Initials</b>	<b>100% payment must accompany Marketing &amp; Supporter Agreement. Support Opportunity will not be held or confirmed without payment. Failure to make payment does not release the contracted or financial obligation of participating Host/Partner. 100% of total cost cancellation penalty applies.</b>
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**Submit application to:**  
Email: [exhibitcontracts@spargo.com](mailto:exhibitcontracts@spargo.com)

**Need Help? Contact:**  
[diaexhibits@spargo.com](mailto:diaexhibits@spargo.com)  
+1-703-631-6200

**Make checks payable to: Drug Information Association, Inc.**

**Mail check payment to:**  
Mail check along with a copy of this form to:  
DIA Exhibits ♦ c/o SPARGO, Inc.  
11208 Waples Mill Road, Suite 112 ♦ Fairfax, VA 22030

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

This agreement will become a contract upon acceptance with authorized signatures and is based upon the fees and rules governing the conference. Exhibitor agrees to receive all written and electronic correspondence from DIA, SPARGO, Inc., and official event contractors in reference to the DIA 2019 Global Annual Meeting and all future DIA events.

Host/Partner (Exhibitor) Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_ Telephone \_\_\_\_\_