

West Meeting Rooms

Exclusively for exhibitors and new this year!

Room Options and Pricing:

Room	Sq Feet	Pricing
W190a	5,239	\$ 70,000
W190b	4,139	\$ 70,000
Combined Room Price	9,378	\$ 105,000
W191	908	\$ 35,000
W192a	2,012	\$ 55,000
W192b	2,935	\$ 60,000
W192c	2,014	\$ 55,000
Combined Room Price	6,961	\$ 86,250
W193a	1,532	\$ 50,000
W193b	1,481	\$ 50,000
Combined Room Price	3,013	\$ 60,000
W194a	1,482	\$ 50,000
W194b	2,754	\$ 60,000
Combined Room Price	4,236	\$ 70,000
W195	1,712	\$ 50,000
W196a	4,800	\$ 70,000
W196b	4,743	\$ 70,000
W196c	4,799	\$ 70,000
Combined Room Price	14,342	\$ 157,500.00

Hours:

Access Begins: Thursday, June 1 at 9:00 AM

Access Ends: Tuesday, June 6 at 2:00 PM

Location:

These meeting rooms are located on level 1 of the West Building (across the bridge from the South Building).

Package:

The meeting room package includes a secured, private room with lockable door, existing carpet, standard electric, and a company identification sign with logo.

With a Meeting Room You Can:

- Conduct pre-arranged meetings in a convenient location for guests.
- Hold spontaneous meetings that, otherwise, wouldn't or couldn't occur.
- Collaborate with multiple interested parties in a private setting that reduces ambient noise.
- Save your guests time and money by meeting in the Convention Center.
- Stay close to all the action.
- Earn priority points for exhibit space and housing selection.

For more information or to reserve a West Building Meeting Room, please contact the ASCO Exhibits Sales Team at ascoexhibits@spargoinc.com 800-564-4220 or 703-631-6200.

ASCO ANNUAL MEETING**Meeting Dates: June 2-6, 2017****Exhibit Dates: June 3-5, 2017****McCormick Place ~ Chicago, Illinois****Click Here to
Submit Via Email**

American Society of Clinical Oncology

*Making a world of difference in cancer care***Section 1: Contact Information**

Company Name

Contact.....Tel..... Email.....

Address.....

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

Section 2: West Building Meeting Room Rental RatesThe Meeting Room package includes a secured, private room with lockable door, existing carpet, standard electric, and a company identification sign with logo. **Meeting Rooms will be available 9:00 AM, Thursday, June 1 through 2:00 PM, Tuesday, June 6.**

- | | | |
|---|--|--|
| <input type="checkbox"/> W190a (5,239 sq. ft.) - \$70,000 | <input type="checkbox"/> W193a (1,532 sq. ft.) - \$50,000 | <input type="checkbox"/> W196a (4,800 sq. ft.) - \$70,000 |
| <input type="checkbox"/> W190b (4,139 sq. ft.) - \$70,000 | <input type="checkbox"/> W193b (1,481 sq. ft.) - \$50,000 | <input type="checkbox"/> W196b (4,743 sq. ft.) - \$70,000 |
| <input type="checkbox"/> Combined (9,378 sq. ft.) - \$105,000 | <input type="checkbox"/> Combined (3,013 sq. ft.) - \$60,000 | <input type="checkbox"/> W196c (4,799 sq. ft.) - \$70,000 |
| | | <input type="checkbox"/> Combined (14,342 sq. ft.) - \$157,500 |
| <input type="checkbox"/> W191 (908 sq. ft.) - \$35,000 | <input type="checkbox"/> W194a (1,482 sq. ft.) - \$50,000 | Total Cost:
\$ _____ |
| <input type="checkbox"/> W192a (2,012 sq. ft.) - \$55,000 | <input type="checkbox"/> W194b (2,754 sq. ft.) - \$60,000 | |
| <input type="checkbox"/> W192b (2,935 sq. ft.) - \$60,000 | <input type="checkbox"/> Combined (4,236 sq. ft.) - \$70,000 | |
| <input type="checkbox"/> W192c (2,014 sq. ft.) - \$55,000 | <input type="checkbox"/> W195 (1,712 sq. ft.) - \$50,000 | |
| <input type="checkbox"/> Combined (6,961 sq. ft.) - \$86,250 | | |

Section 3: Payment Information

Initials	Deposit and Payment Schedule
	September 2, 2016...50% due for applications submitted prior to September 2, 2016
	September 2, 2016 - January 26, 2017...50% due w/ application
	After January 26, 2017...Payment in full due w/ application
ASCO requires payment in full no later than January 27, 2017. Failure to make payments does not release the contracted or financial obligation of Exhibitor.	

Make checks payable to: ASCO

Tel: 800-564-4220 • Fax: 703-563-2691 • Email: exhibitcontracts@spargoinc.com

Credit Card Payment (Your signature authorizes your card to be charged for the total amount due according to the schedule above. ASCO reserves the right to charge the correct amount if different from the total listed. Cardholder is responsible for any changes in the exchange rate.)☐ Visa ☐ MasterCard ☐ American Express ☐ Discover

Card Number: _____ CSV#: _____ Amount: \$ _____

Exp. Date: _____ Name on Card: _____ Signature: _____

Card Billing Address: _____

Section 4: Cancellation Penalties

Initials	Cancellation Penalties
	Through September 1, 2016.....0%
	September 2, 2016 - January 26, 2017.....50%
	After January 26, 2017.....100%
	Full refund if canceled by ASCO without cause

Mail payments to:

ASCO Exposition Mgmt., c/o SPARGO, Inc.

11208 Waples Mill Road, Suite 112 • Fairfax, VA 22030

Section 5: Acknowledgement

I acknowledge that as an authorized representative of the above stated Exhibitor, I have received, reviewed, and agree that Exhibitor will comply with the *Policies for Exhibitors and Other Organizations at ASCO Meetings* available on nam.asco.org and that Exhibitor will comply with all updates of such policies applicable to the 2017 ASCO Annual Meeting, which will be made available in August 2016. I understand that Exhibitors must book their hotel rooms through the ASCO Annual Meeting Customer Service Center and that Exhibitors who fail to do so are subject to penalties for current and future ASCO Annual Meetings, including a surcharge of 10% on the exhibit space rental rate. Exhibitor agrees to receive all written and electronic correspondence from ASCO and SPARGO, Inc. in reference to the ASCO Annual Meeting and all future ASCO events. This meeting room application will become a contract upon Exhibitor's authorized signature and ASCO's acceptance and approval.

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

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