

ASN



KIDNEYWEEK 2018

San Diego, CA • Oct 23 – 28



Enhanced Exhibitor Listing

Expand Your Presence Before, During and After Kidney Week!

Kidney Week has gone green! The Mobile App and online listings are the **ONLY WAY** attendees will be able to see what you have to offer and where you are located in the Exhibit Hall.

	Exhibitor Listing Features	Basic Included	Premium \$900
ONLINE	Company Name, Booth Number	x	x
	City, State, Country	x	x
	URL	x	x
	Product & Service Categories	Up to 5	Up to 10
	Links to Social Media Platforms	x	x
	600 Character Description	x	x
	Expanded Description of Additional 600 Characters		x
	Enhanced Listing Icon on Floor Plan Booth and Exhibitor List		x
	Company Logo		x
	Up to 2 Press Releases/Promotional Flyers		x
	Up to 3 Product Photos with Description		x
MOBILE	Company Name, Booth Number	x	x
	City, State, Country	x	x
	URL	x	x
	Product & Service Categories	Up to 5	Up to 10
	600 Character Company Description	x	x
	Expanded Description of Additional 600 Characters		x
	Up to 2 Press Releases/Promotional Flyers		x
	Company Logo		x

Upgrade Your Listing!

Contact 800-564-4220 / 703-631-6200 or kidneyweek@spargoinc.com.



APPLICATION AND CONTRACT FOR LISTING

ASN Kidney Week 2018

Meeting Dates: October 23 - 28, 2018 (Exhibit Dates Oct. 25 - 27)

[Click Here to Submit Via Email](#)

Contact Information

Exhibiting Name (*Will be used for all ASN Kidney Week 2018 publications*)

Company Name.....

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

Tel..... Fax.....

Email..... Website

Address.....

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

Premium Listing Upgrade

Kidney Week has gone green! The Mobile App and online listings are the **ONLY WAY** attendees will be able to see what you have to offer and where you are located in the Exhibit Hall.

Premium Exhibitor Listing - \$900

Within 10 business days of receipt of application and payment, a username and password will be sent to the contact listed above to submit directory upgrade information. Information for the online listing may be updated any time prior to the meeting.

Payment Information

Deposit and Payment Schedule
Payment in full due with application
Failure to make payments does not release the contracted or financial obligation of Exhibitor.

Make checks payable to: ASN

For Application Questions, Call 800-564-4220

Cancellation Penalties

Cancellation Penalties
No refund if exhibiting company cancels

Fax / Email Application to:
703-563-2691 / exhibitcontracts@spargo.com

Mail Check Payment to:
ASN Kidney Week 2018
P.O. Box 890658 ♦ Charlotte, NC 28289-0658

Overnight Check Payment to:
ASN Kidney Week 2018
BB&T Remittance Processing ♦ Attn: Box 890658
5130 Parkway Plaza Boulevard ♦ Charlotte, NC 28217

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* contained in the ASN Kidney Week 2018 Exhibitor Prospectus. Exhibitor agrees to receive all written and electronic correspondence from ASN and SPARGO, Inc. in reference to ASN Kidney Week and all future ASN events. This enhanced exhibitor visibility plan application will become a contract upon Exhibitor's authorized signature and ASN's acceptance and approval.

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

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