

ONS 42nd Annual Congress

May 4–7, 2017 • Denver, CO

Application for Exhibit Space

SmithBucklin
330 N. Wabash Ave.
Chicago, IL 60611

Questions? Contact Our Sales Managers

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OFFICE USE ONLY

Booth assigned _____
Received _____
Price _____
Point total _____

1. Your Contact Information (List as you would like it to appear in all materials.)

Company name _____
Contact name _____
Title _____
Address _____
Address _____
City _____ State _____ Zip _____
Email _____
Website _____ Phone _____
Fax _____
If you are using a third party to plan your exhibit please provide name and contact information _____

2. Select Your Booth Type

- Commercial Booth (inline): \$3,800 per 10 x 10 inline booth*
- Hospital Nurse Recruitment Booth (inline): \$3,300 per 10 x 10 inline booth*
- Patient Advocacy Booth: \$850 per 10 x 10 inline booth* (must submit proof of 501(c)(3) status)

*All corner booths must add an additional \$200 per corner.

Cost: # of 10x10 booths _____ x Rate \$ _____ + # of Corners \$ _____ =

Total Booth Price \$ _____

New: Must qualify as patient advocacy organization and submit proof of 501(c)(3) status. See Patient Advocacy Exhibit Rate section in the attached rules and regulations.

Please note: Companies that qualify for the Hospital Nurse Recruitment and Patient Advocacy rates must select booth space in the respective pavilions on the show floor.

3. Choose Your Booth Space

Please select your top-six choices for your booth space.

First choice	
Second choice	
Third choice	
Fourth choice	
Fifth choice	
Sixth choice	

ONS will make its best efforts to assign companies to one of the requested spaces.

A deposit of 50% of the total exhibit space is due with application. Applications submitted after October 1, 2016, must be accompanied by payment in full.

If possible, don't place us near:

4. Submit Your Payment

Applications submitted after October 1, 2016, must be accompanied by payment in full.

Send Check payable to ONS (tax ID #51-0183279) to

Oncology Nursing Society Exhibits
P.O. Box 3500
Pittsburgh, PA 15230

If you need to FedEx your check payment, please mail it to the following address.

SmithBucklin
ATTN: Liz Woods
330 N. Wabash Ave, Suite 2000
Chicago, IL 60611

5. Terms of Agreement

- We agree to abide by all rules and regulations governing the ONS 42nd Annual Congress as printed in the prospectus and which are part of this application. Acceptance of this application by show management constitutes a contract.

Date _____

Authorized signature* (required)

Name/title (please print)

*Authorized signature must come directly from exhibiting company.

6. Submit Your Contract

Email or fax this application to jshupe@smithbucklin.com, ahaigh@smithbucklin.com, astrombeck@smithbucklin.com, or 312-673-6580 (fax). Do not mail contracts.

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