

## New England Society for Vascular Surgery

49<sup>th</sup> Annual Meeting I October 14-16, 2022 Gurney's Newport I Newport, Rhode Island

## Application DEADLINE: TUESDAY, SEPTEMBER 13, 2022

Company Name		Exhibit Coordinator	
Address		City/State/Zip	
Daytime Telephone		Email	
Marketing Sele	ction [50% Deposit Due With Applicatio	n] Educational Grant [50% Deposit Due With Application]	
<ul> <li>Platinum Level (\$30,00</li> <li>Gold Level (\$20,000)</li> <li>Silver Level (\$15,000)</li> </ul>	00) 🔲 Bronze Level (\$10,000) 🗌 Satellite Symposium (\$15,000)	<ul> <li>Platinum Level (\$30,000)</li> <li>Gold Level (\$20,000)</li> <li>Coffee Break (\$5,000/day)</li> <li>Silver Level (\$15,000)</li> <li>WiFi for Attendees (\$10,000)</li> <li>Bronze Level (\$10,000)</li> <li>Other Amount:</li></ul>	
Exhibit Only [50%	Deposit Due With Each Application]		
□ Tabletop Exhibit (\$5,0	00)		
Placement In th	e Exhibit Hall [Every attempt wi	Il be made to honor placement requests. However, requests cannot be guaranteed.]	
1 <sup>st</sup> Choice:	2 <sup>nd</sup> Choice: 3 <sup>rd</sup> Choice:	4 <sup>th</sup> Choice:	
If possible, please avoid s	pace near the following company:		
We agree to abide by the	terms and conditions printed in this ex	hibitor prospectus: 🛛 [Please Check]	
Product/Equipr	nent Being Displayed		
		Meeting:	
Payment Inform			
FINAL PAYMENT	Full payment is due 30-days prior to the start of the NESVS Annual Meeting.		
CANCELLATION POLICY	Cancellations received in writing 45-days prior to the start of the Annual Meeting will be subject to a 25% administrative fee. No refunds for cancellations will be made within 45-days of the Annual Meeting.		
PAYMENT BY CHECK	Please make checks payable to the New England Society for Vascular Surgery and mail to: 100 Cummings Center, Suite 124-A, Beverly, MA 01915		
PAYMENT METHOD	□ MasterCard □ VISA □ Am	erican Express 🛛 Check (Check #:)	
	Credit Card #:	Exp: / CVV Code:	
	Billing Address:		
	Billing City/State/Postal Code:		

Name as it Appears on Card:

\*\*\* PLEASE EMAIL COMPLETED APPLICATION TO: NESVS@ADMINISTRARE.COM \*\*\*