

Exhibit Application

Exhibit fees must be received by September 1, 2022 in order for your company to be recognized in the final program and on-site signage. Registration forms to register company representatives, and an exhibitor kit, will be sent after payment is received by ANA.

CONTACT All materials will be sent to the person listed below. _____

Name _____

Email _____ Phone _____

COMPANY INFORMATION Name will appear in final program as written below.

Company Name (as you wish it to appear on signage and acknowledgements) _____

Mailing Address _____

Email _____ Phone _____

Fax _____ Website _____

COMPANY DESCRIPTION

Submit a 50-word description to
sponsorship@myana.org

EXHIBIT TYPE AND RATE

- 10 x 10 Exhibit Booth \$4,000
- Tabletop Exhibit..... \$2,500
- Tabletop Exhibit • Non-Profit Organization \$500
- I prefer not to be located close to (please list companies):

All exhibit space is assigned by ANA on a first-come, first-served basis.

PAYMENT INFORMATION

Check Make check payable to the American Neurological Association, 1120 Route 73, Suite 200, Mount Laurel, NJ 08054

Credit Card (check one) Visa Mastercard AMEX

Credit Card # _____ Expiration Date _____ CVV # _____

Name on Card _____

We/I agree to abide by all the requirements, restrictions, and obligations of ANA2022. We/I assume the entire responsibility and liability for losses, damages, and claims arising from injury or damage to our/my displays, equipment, and other property brought upon the premises of the Hyatt Regency Chicago and shall indemnify and hold harmless the agents and employees of the Hyatt Regency Chicago, and the ANA from any such losses, damages and claims. By signing this, we/I state that we/I am hereby authorized to reserve space for our/my use in the exhibit area of the 147th Annual Meetings of the American Neurological Association to be held October 22-25, 2022 at the Hyatt Regency Chicago.

Cancellations: Cancellation of exhibit space must be made in writing and will be effective the date such notice is received in the ANA office.

Sponsor Signature _____ Date _____

ANA Representative Signature _____ Date _____