

Ancillary Meetings and Events Application

Event Information

Contact Name: _____

Company: _____

Ancillary Event Name: _____

Event Description: _____

Phone: _____ Email: _____

Preferred Date and Time *(subject to change)*

Events involving annual meeting attendees can only be scheduled during the date and times listed below. No event should be scheduled during official conference events as listed in the schedule of events, www.augs-iuga2019.org. Please indicate your preferred time:

Tuesday, 24 Sept. Wed., 25 Sept. Thurs., 26 Sept. Sat. 28 Sept.
(7 pm - midnight) (8 pm - midnight) (6:30 pm - midnight) (2 pm - midnight)

Requested Date:

Requested Time: Start: _____ am/pm End: _____ am/pm

Preferred Location: Convention Center / Omni Hotel

Maximum attendance (provide number): _____

Please indicate your room set-up request (conference, theater, classroom U-shape):

Please indicate any special requests:

Please note that dates, times and room size is subject to availability at the facility.

Application Deadline: August 9, 2019

Please sign and return to info@aug.org. Please keep a copy of this application for your records. I have read and understand all instructions/policies related to Ancillary Events and Meetings at the AUGS/IUGA 2019 Scientific Meeting and agree to abide by them. I understand that a \$500 ancillary event fee (\$900 if not an exhibitor) will be assessed for all approved ancillary meetings and events, this amount will be due and payable in full before the start of the AUGS/IUGA 2019 Scientific Meeting. The fee will be invoiced once the event is approved and assigned space.

Signature of Event Sponsor

Organization

Date