

Reserve Exhibit Space

**Deadline
to reserve your
exhibit space is
Monday,
August 30, 2010**



Standard Booth Space

Limited amount of tabletop exhibits are offered for this event. Gain direct access to attendees.

NCCN 5th Annual Congress: **Hematologic Malignancies**TM

October 8 – 9, 2010

New York Marriott Marquis®
1535 Broadway • New York, New York

Join the National Comprehensive Cancer Network® (NCCN®) at the NCCN 5th Annual Congress: Hematologic MalignanciesTM and demonstrate your leadership in cancer care with NCCN through select exhibit hall space. The NCCN Annual Congress: Hematologic MalignanciesTM attracts more than 600 attendees from across the U.S.

The treatment of hematologic malignancies is increasingly complex. Issues relating to pathology, transplantation, and various new therapies require oncologists and hematologists to stay abreast of new advances. In addition, targeted therapies and oral treatments bring new benefits to patients. This Congress will focus on the new approaches that have been incorporated into patient management, including the use of drugs, biologics, and diagnostics. The agenda will address Hodgkin Lymphoma, Multiple Myeloma, Non-Hodgkin's Lymphomas, and supportive care issues in hematologic malignancies.



National
Comprehensive
Cancer
Network®

For more information, contact
Jennifer Tredwell at 215.690.0274
or tredwell@nccn.org.

Visit NCCN.org to view more information.

Exhibit Space Application and Contract

NCCN 5th Annual Congress: **Hematologic Malignancies™** October 8 – 9, 2010

New York Marriott Marquis® • 1535 Broadway • New York, New York

Exhibitor Information

(Please type or print clearly)

Organization: _____

Contact Name: _____
(Name of person who will be responsible for your exhibit and to whom all future correspondence should be sent)

Title: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Phone _____

E-mail (required for registration) _____

Promotional Information

Organization Name for Congress Materials
(Use upper and lower case letters exactly as you want your organization's name to appear on congress materials and signage)

Please provide a brief 75-word description of your company/product to be included in the NCCN 5th Annual Congress Exhibit Guide, which will be distributed to all congress attendees.

Payment Information

NCCN 5th Annual Congress: Hematologic Malignancies™

- \$10,000 (\$9,500 if reserved by April 30, 2010) – Tabletop only
- \$5,000 Inside front cover, 4-color, full page Ad in the NCCN 5th Annual Congress: Hematologic Malignancies™ Exhibit Guide
- \$5,000 Inside back cover, 4-color, full page Ad in the NCCN 5th Annual Congress: Hematologic Malignancies™ Exhibit Guide
- \$5,000 Center Spread, 2 full page, 4-color Ads in the NCCN 5th Annual Congress: Hematologic Malignancies™ Exhibit Guide
- \$1,500 Run-of-book, full page, 4-color Ad in the NCCN 5th Annual Congress: Hematologic Malignancies™ Exhibit Guide

Total: _____

- Please send an invoice
- Check enclosed (Please make checks payable to: National Comprehensive Cancer Network and mail to: NCCN, 275 Commerce Drive, Ste. 300, Fort Washington, PA 19034, Attn: Janice Tucker)
- Credit Card (Visa/MasterCard/American Express)

Name: _____

Billing Address: _____

City: _____

State/Province: _____ Zip/Postal Code: _____

Card Number: _____

Card Verification #: _____ Exp. Date: _____

NCCN may charge the credit card for the amount as indicated above.

Signature: _____

Instructions

1. Apply for exhibit space by completing this form and submitting it by **Monday, August 30, 2010.**
2. You will receive a confirmation letter and a registration packet including attendee registration forms.
3. You will receive a Service Kit with exhibit details four to six weeks before the event.

Send Completed Application to:

Jennifer Tredwell
Senior Manager Marketing & Communications
NCCN
275 Commerce Dr.
Suite 300
Fort Washington, PA 19034
Phone – 215.690.0274
Fax – 215.690.0280
tredwell@nccn.org

For Support Opportunities:

C. Lyn Fitzgerald
Vice President, U.S. & Global Development
NCCN
275 Commerce Dr.
Suite 300
Fort Washington, PA 19034
Phone – 215.690.0226
Fax – 215.690.0280
fitzgerald@nccn.org

For Patients: NCCN.com

For Clinicians: NCCN.org