



Annual Meetings 2015

Additional Meetings Contract

Atlanta, GA • November 21–24



Contact Person _____ Organization Name _____
 State _____ Country _____ E-mail _____ Phone _____

Instructions

- Please use a new form for each event.
- **All change requests after July 17 will incur a \$15 per half hour fee.** (Includes day, time, or location.)
- Offsite meeting *Program Book* advertisement fees are \$75. Please attach the information to be included in the *Program Book*.
- Requests received by July 17 will be listed in the *Program Book*, which is mailed to all registrants in October.
- Requests received by September 18 will be listed in the *At-A-Glance* distributed onsite.

TITLE OF EVENT OR MEETING (print exactly as it is to appear in *Program Book*):

EVENT INFORMATION:

Please indicate the day and time of your event:

Thu (11/19) Fri (11/20) Sat (11/21) Sun (11/22) Mon (11/23) Tue (11/24)

Start time: _____ End time: _____ Number of half hour time slots: _____

Event type: Meeting Breakfast Luncheon Dinner Reception

Estimated Attendance (required for room assignment) _____

Room arrangement Reception Banquet
 Assorted tall and short cocktail tables for reception events. Round tables with variable number of chairs (8 - 10).
 Theater Conference
 Rows of chairs and a center aisle facing the front for a presentation. Conference table with a variable number of chairs surrounding the entire table.

Food & Beverage Event Yes No Audiovisual required Yes No

Do you require internet for your meeting? Yes No

PROGRAM BOOK LISTING (see instructions on page 2):

Do Not List Basic Additional Description*

*Supplemental verbage must be provided electronically to AdditionalMeetings@annual-meetings.org

PAYMENT INFORMATION:

| | |
|---|---|
| Meeting fees for contracts received by <u>September 18</u> are \$35 per half hour time slot. | Total Number of Time Slots _____ x \$35 = _____ |
| Meeting fees for contracts received by <u>October 23</u> are \$50 per half hour time slot. | Total Number of Time Slots _____ x \$50 = _____ |
| Meeting fees for contracts received <u>after October 23</u> are \$70 per half hour time slot. | Total Number of Time Slots _____ x \$70 = _____ |
| Offsite meeting Program Book advertisement fees are \$75 | TOTAL _____ |

Visa MasterCard American Express Discover
 Card # _____
 Card Expiration Date (mm/yy) _____ / _____ Security Code _____
 Signature (required) _____

I agree to pay above amount according to card issuers agreement.

My check is enclosed in the amount of \$ _____

Check # _____

IMPORTANT: This is not a binding contract until proper payment is received and this application/contract is accepted. Annual Meetings 2015 has the right to void this application/contract if payment is not received or if we decline the additional meeting request. I have read, understood, and accepted all terms and conditions of this application/contract and will abide by the Terms and Provisions accompanying this application/contract.

Signature _____ Print Name _____ Title _____ Date _____

Send contract and payment to: Annual Meetings 2015, Additional Meetings, The Luce Center,
 825 Houston Mill Road, Suite 300, Atlanta, GA 30329, USA. Phone: 404-727-7972 Fax: 404-935-5321
AdditionalMeetings@annual-meetings.org



Annual Meetings 2015
Additional Meetings Instructions
Atlanta, GA • November 21–24



COMPLETING THE ADDITIONAL MEETINGS CONTRACT

- **ONE EVENT PER FORM:** You may only request space for one event per form. If you have more than one event, copy the form as needed. Follow up two weeks after you send in the for to ensure it was received.
- **EVENT TYPE:** Choosing the event type will help us understand what your event is about.
- **ESTIMATED ATTENDANCE:** Forms will not be accepted without this information. Be as accurate as possible.
- **ROOM ARRANGEMENT:** If no room arrangement is chosen, we reserve the right to choose the arrangement for your event.
- **ROOM PLACEMENT:** Events will be scheduled based on the following dates and deadlines. Events will not be scheduled between these dates.

If we receive your contract and payment:

By May 22:

- Event listed in *Program Book*, which is mailed to all registrants in October
- Confirmation of room assignment by July 6.

By July 17:

- Event listed in *Program Book*, which is mailed to all registrants in October
- Confirmation of room assignment by August 17.

By September 18:

- Event listed in *At A Glance*, which is distributed onsite.
- Confirmation of room assignment by October 12.

By October 23:

- Event will not be listed in printed publications
- Confirmation of room assignment by November 9.

After October 23:

- Event will not be listed in printed publications
- Confirmation of room assignment will be handled on an individual basis

LISTINGS IN THE ANNUAL MEETING PROGRAM BOOK

- You must check the appropriate box on the front of this form if you wish to have your event listed in the *Program Book*. The *Program Book* deadline is July 17. If no box is checked, the event will have a basic listing.
- The name of your event, day, date, time and location will be printed.
- If you wish to provide additional text (no more than 200 words permitted), see the examples page. You must email text to additionalmeetings@annual-meetings.org.

FEES, PAYMENT, AND DEADLINES

- Fees are assessed per half hour time slot.
- Any event that extends into the next half hour time slot will require reservation of the full time slot.
- All change requests after July 17 will incur a \$15 per half hour fee. (Includes day, time, or location.)
- Fees charged for scheduling your event are nonrefundable. There will be a \$30 fee for all returned checks.
- No online reservations will be accepted after October 23.



Annual Meetings 2015
Additional Meetings Examples
Atlanta, GA • November 21–24



EVENT LISTING EXAMPLES

Example #1: Basic Listing (default)

AM1

Organization and Title of Event

Day, 8:00 pm-9:30 pm

Hotel – Room Name

Example #2: Expanded Listing

AM2

Organization and Title of Event

Day, 8:00 pm-9:30 pm

Hotel – Room Name

Note that the below is a suggestion of what data you might want to input in your description. All submissions will follow this format in the Program Book. If any one, or all, of these items does not apply to your event, feel free to omit it.

**Sessions may either have panelists or papers in the listing, not both. Any session may have presiders, respondents, and/or a description.*

- Jane Doe, University of Anywhere, Presiding
- Additional description in paragraph form if desired
- Panelists or Paper Listings

Option 1 – Panelists

Panelists:

Sally Doe, Anywhere University

Bob Doe, Atlanta, GA (city and state if not institutionally affiliated)

Joe Doe, Anywhere University

OR

Option 2 – Papers

Sally Doe, Anywhere University

Title of Paper

Bob Doe, Atlanta, GA (city and state if not institutionally affiliated)

Title of Paper

Joe Doe, Anywhere University

Title of Paper

- Responding: John Doe, University of Anywhere