

48th Annual ONS Congress

Exhibitor Application



Smithbucklin
330 N. Wabash Ave.
Chicago, IL 60611

Questions? Contact the ONS Sales Team
ons@smithbucklin.com

April 26 - April 30, 2023 | San Antonio, TX

Section 1. Company Name & Address

Company Name: _____ City/State: _____

Company Address: _____ Zip: _____

1. Primary Contact (all Congress exhibit planning details will be sent to Primary Contact)

Name: _____

Title: _____

Email: _____

2. Alternate Contact

Name: _____

Title: _____

Email: _____

3. Select Your Booth Type

Rate:	Commercial Booth (inline): \$4,400 per 10 x 10 booth	Number of booths requested: _____ x \$4,400 = \$ _____
	Career Fair Booth (inline): \$4,400 per 10 x 10 booth	Number of booths requested: _____ x \$4,400 = \$ _____
	Patient Advocacy Booth: \$1,375 per 10 x 10 booth	Number of booths requested: _____ x \$1,375 = \$ _____
	Patient Product Pavilion Booth (inline): \$4,400 per 10 x 10 booth	Number of booths requested: _____ x \$4,400 = \$ _____
	Corner Fee: \$250	Number of corners requested: _____ x \$250 = \$ _____
		Total Fee: \$ _____

4. Choose Your Booth Space

Please select your top-6 choices for your booth space. ONS will make its best efforts to assign companies to one of the requested spaces.

First Choice: _____ Second Choice: _____

Third Choice: _____ Fourth Choice: _____

Fifth Choice: _____ Sixth Choice: _____

If possible, don't place us near: _____

[View the ONS Congress 2023 Floor Plan here.](#)

5. Submit Your Payment

(Amount due will be invoiced. Please refer to payment terms for payment schedules.)

Invoice Exhibiting Company

Invoice Third Party

Check Box if Billing Address is same as Company Address

Billing Information:

Billing Contact: _____

Phone: _____ Email: _____

Billing Address: _____

City: _____ State: _____ Zip: _____

Send Check payable to ONS (tax ID #51-0183279) to

Oncology Nursing Society Exhibits
P.O. Box 3500
Pittsburgh, PA 15230

If you need to FedEx your check payment, please mail it to the following address.

Smithbucklin
ATTN: ONS Accounts Receivable
330 N. Wabash Ave, Suite 2000
Chicago, IL 60611

6. Finalize Your Application

Exhibitors, sponsors, and their agents and representatives are subject to, and intend to be legally bound by, the ONS Congress Exhibitor and Sponsor Rules and Regulations (the "Rules"), and the individual completing this application certifies that he or she is authorized to bind the exhibitor, sponsor, and their agents and representatives thereto and act on their behalf. The Rules are incorporated herein and are available here: <https://www.onssponsorships.org/rules-and-regulations>. Neither this application nor the Rules can be modified by printed or handwritten additions, deletions, changes, or strikethroughs, and any modifications inconsistent with the Rules available at <https://www.onssponsorships.org/rules-and-regulations> will be voidable by ONS. The exhibitor, sponsor, and their agents and representatives are liable for the contracted amount, and failure to make payment does not relieve the obligation to pay the contracted amount. ONS reserves the right to reject an application or deny benefits and privileges for failure to make timely payment.

Authorized Company Representative: (Please Print Name and Title)

Name: _____

Title: _____

Date: _____

Authorized Signature (required):

7. Submit Your Application

Email this application to ons@smithbucklin.com. Do not mail applications.