



The Societies for Pediatric Urology  
**Pediatric Urology Fall Congress**  
September 14-16, 2018  
The Westin Peachtree Plaza • Atlanta, Georgia  
fallcongress.spuonline.org



## **2018 PEDIATRIC UROLOGY FALL CONGRESS** **MARKETING SUPPORT AGREEMENT FORM**

Company: \_\_\_\_\_

Contact: \_\_\_\_\_ Title: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Country: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_

*By signing this document, company agrees that this is a legally binding contract and that 50% payment is due with this agreement with the balance due July 7, 2017. If a written cancellation is received on or before July 7, 2017, 25% of the entire fee will be due or retained as a cancellation fee. If a written cancellation is received after July 7, 2017 a refund will not be issued unless the support is resold at the full amount. At that time a full refund less 25% administrative fee will be issued. All artwork must be submitted to the Fall Congress for approval prior to use.*

Please check the appropriate item:

- |  |         |  |         |
|--|---------|--|---------|
| <input type="checkbox"/> Attendee Bags | \$7,500 | <input type="checkbox"/> Hotel Key Cards | \$7,500 |
| <input type="checkbox"/> Mobile App    | \$7,500 |  |         |

**PAYMENT METHOD:**

WIRE TRANSFER – Please call our offices at +978.927.8330 for wiring information

Check amount enclosed: \$ \_\_\_\_\_

CREDIT CARD      

Amount to be charged: \$ \_\_\_\_\_

\_\_\_\_\_  
Credit Card Number

\_\_\_\_\_  
Expiration Date      Security Code (3-4 numbers on front or back of card)

\_\_\_\_\_  
Name as it appears on credit card

\_\_\_\_\_  
Cardholder's Signature

Please check if credit card billing address is same as contact information at the top of the form.

Billing address if different than above: \_\_\_\_\_

**DO NOT EMAIL full credit card information.**  
Form must be faxed if credit card number is showing via our secure fax **978.524.0461**. If you prefer to email please leave out the credit card number and provide a phone number and we will call you for the credit card number.

**Complete and return to:** Yvonne Grunebaum, Director of Industry Relations | PUNS  
500 Cummings Center, Suite 4400  
Beverly, MA 01915 USA | Phone: 978-927-8330 | Fax: 978-524-0461