



# Application & Contract for Interactive Learning Lab™

## Company & Contact Information (Please print clearly.)

Company Name: \_\_\_\_\_  
 Street Address: \_\_\_\_\_  
 City/Province: \_\_\_\_\_ State/Country: \_\_\_\_\_ ZIP/Postal Code: \_\_\_\_\_  
 Contact: \_\_\_\_\_ Title: \_\_\_\_\_  
 Direct Phone: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_ Contact's Email (required): \_\_\_\_\_  
 If company exhibits at ACC under a different name, what is it? \_\_\_\_\_

## Terms & Conditions

- Only exhibiting companies in good standing with ACC are permitted to submit an application for a Learning Lab. Exhibiting companies must settle any outstanding balances from current and/or previous ACC events in order for their applications to be considered.
- This application will not become a binding Contract until this application is approved and signed by ACC.

## Learning Lab Sizes and Fees

30'x40'—\$53,000      20'x20'—\$42,000

Please complete one Application for each Learning Lab requested.

## Payment Method

**Check or Wire Transfer**—Upon assignment of an Interactive Learning Lab, ACC will invoice the Participant—50% of the total amount will be due by Nov. 1, 2019, and the balance will be due by Jan. 24, 2020. As of Jan. 24, 2020, full payment is required with application. All wire transfer fees are Participant's responsibility. Please note "ACC ILL" in the memo field of the check to ensure correct application of funds.

**Credit Card**—An invoice will be sent with instructions to submit credit card payment online. ACC will charge the credit card provided 50% of the total amount due by Nov. 1, 2019, and the balance will be charged by Jan. 24, 2020. As of Jan. 24, 2020, full payment is required with application.

## Questions?

Please contact Christy Troiano, Director, Meeting Exposition Sales and Strategy, at (202) 375-6118 or [ctroiano@acc.org](mailto:ctroiano@acc.org).

## Agreement

I, the undersigned, hereby make application for an Interactive Learning Lab™ (check one):

- 30'x40'—\$53,000  
 20'x20'—\$42,000

at the American College of Cardiology's (ACC) 69<sup>th</sup> Annual Scientific Session & Expo together with World Congress of Cardiology (ACC.20). I am an authorized representative of the company with the full power and authority to sign and deliver this Application. The company listed on this Application agrees to comply with the policies, rules and regulations contained in the *ACC.20 Rules, Regulations, Terms & Conditions*, the Exhibitor Service Kit, the *Interactive Learning Lab Guidelines* and all policies, rules and regulations adopted by ACC hereinafter (collectively, the "ACC.20 Rules").

Authorized Officer's Name: \_\_\_\_\_

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

Authorized Officer's Signature (Required): \_\_\_\_\_

Date: \_\_\_\_\_

## Send Applications to:

Scan & Email: [ctroiano@acc.org](mailto:ctroiano@acc.org) Fax: (202) 375-6838

### FOR ACC USE ONLY

Date Received \_\_\_\_\_ Assignment Date \_\_\_\_\_  
 Lab Assigned \_\_\_\_\_  
 Amount Due \_\_\_\_\_ Amount Paid \_\_\_\_\_  
 Cancelled Date \_\_\_\_\_ Liquidated Damages \_\_\_\_\_  
 Accepted by \_\_\_\_\_  
 Date \_\_\_\_\_