



EASTERN VASCULAR SOCIETY
31st Annual Meeting
OCTOBER 5-8, 2017
THE WESTIN SAVANNAH HARBOR
Savannah, GA



MARKETING AGREEMENT FORM

EVS 31st Annual Meeting
October 5-8, 2017
The Westin Savannah Harbor, Savannah, GA



Exhibitor: _____

Contact: _____ Title: _____

Address: _____

City: _____ State: _____ Country: _____ Zip: _____

Telephone: _____ Fax: _____

Email: _____ Authorized Signature: _____

By signing this document, company agrees to the following commitment and that a 50% payment is due with this agreement and the balance is due by **Friday, June 23, 2017**. In the event of cancellation after June 24th, a refund will not be issued.

All applicable artwork must be submitted to EVS for approval prior to use. This includes banners, screensavers and ads. Only EVS exhibitors will be allowed to participate in the EVS Marketing program. Please select the marketing opportunity:

- Hotel Key Cards \$5,000
- Annual Meeting App \$10,000
- Meeting Bags \$6,000

PAYMENT INFORMATION: Please note that as part of our compliance we can no longer accept credit card numbers via e-mail. This policy is designed to increase data security for cardholders and merchants. Emails received containing credit card information will be blocked. Please use the following methods of payment:

FEE DUE: \$ _____ Check amount enclosed: \$ _____

Secure Fax: + 978.524.0461 This form must be faxed if credit card number is showing. **DO NOT EMAIL.**

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.
- If billing address is different, please enter below.

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

Company Name _____
Street Address _____
City/State/Postal Code /Country _____

Complete and return to:
Eastern Vascular Society
500 Cummings Center, Suite 4550
Beverly, MA 01915 USA
Secure Fax: 978-524-0461