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AMERICAN SOCIETY FOR GASTROINTESTINAL ENDOSCOPY (ASGE)				
EXHIBIT SPACE AGREEMENT				

Program/activity: GI Outlook 2017: The Practice Management Conference

Program/activity description: 10'x10' Booth
Date of program/activity: August 11-13, 2017
Location of program/activity: Loews Hollywood Hotel, Hollywood, CA
Company name:
Company address:
Company contact:
Title:
Phone:
Fax:
Email:
Society Contact information: American Society for Gastrointestinal Endoscopy (ASGE)
3300 Woodcreek Drive
Downers Grove, IL 60515
Society contact: Sara Estrella Title: Assistant Manager of Sales & Business Development
Phone number: 630-570-5618; Fax number: 630-573-0691 Email address: sestrella@asge.org
Booth Fee: \$3,750
Make check payable to: American Society for Gastrointestinal Endoscopy (ASGE) Tax ID #: 23-7058604

Cancellations/Refunds — In order to process a refund, ASGE must receive written notice of cancellation from the exhibitor. If ASGE receives notice of cancellation more than 60 days prior to the Conference dates, ASGE will refund the booth fee minus a \$100 processing fee; if cancellation occurs less than 60 days prior to the Conference dates, the processing fee will be 50% of the booth fee. No refund will be made for cancellations less than 30 days prior to the Conference dates.

As an official representative of the Exhibiting Company, I have been authorized by my company to sign this agreement.

Signed	Signed
	Sara Estrella
Company Name	ASGE Representative
	Assistant Manager of Sales & Business Development
Title	Title
Date	Date
	630-570-5618
Phone	Phone
	sestrella@asge.org
E-mail	Email

(INTERNAL USE ONLY)

Date received:	Initials:	
Booth number:		
Special instructions:		