

BALTIMORE 2018

SLEEP

JUNE 02-06

APPLICATION TO SPONSOR INDUSTRY PRODUCT THEATER

SLEEP 2018 | 32nd Annual Meeting of the Associated Professional Sleep Societies, LLC

Baltimore Convention Center | Baltimore, MD | June 2-6, 2018

APPLICATION MUST BE RECEIVED BY THE APSS MEETING DEPARTMENT BY MARCH 7, 2018

My signature below verifies that I have read and understand the conditions of this application, as well as the conditions and regulations published in the Sponsorship Guide, "Guidelines for Industry Product Theaters". By signing below, I am indicating my company's agreement to be bound by any and all such conditions and regulations. I accept responsibility for informing all of our employees, speakers, supporters and event organizers of these conditions and for ensuring that they will abide by them. I further understand the penalties, which may be assessed if we are in violation of these conditions, as well as the cancellation policy for canceling our product theater.

Signature: _____ Date: _____

(AUTHORIZED INDUSTRY PRODUCT THEATER REPRESENTATIVE)

\$20,000 payment enclosed and made payable to the APSS (Monday or Tuesday)

\$15,000 payment enclosed and made payable to the APSS (Wednesday only)

CHECKS AND INTERNATIONAL MONEY ORDERS SHOULD BE MADE PAYABLE TO THE APSS

CHECKS WILL NOT BE ACCEPTED UNLESS THEY ARE MADE IN U.S. FUNDS DRAWN ON A U.S. BANK.

Name of Event: _____

DATE WILL BE DETERMINED BY THE APSS MEETING DEPARTMENT

Theaters are available during lunch (12:30pm – 1:30pm) on Monday, June 4; Tuesday, June 5 and Wednesday, June 6, 2018.

Requested Day (1st Choice): _____ Requested Day (2nd choice): _____

Will you be utilizing the food and beverage that is included in the sponsorship? Yes No

ON-SITE CONTACT INFORMATION

Company Name: _____

Primary Contact Person: _____

Address: _____

City: _____ State/Province: _____ Postal Code: _____ Country: _____

Telephone: _____ Email: _____

PLEASE ATTACH THE FOLLOWING INFORMATION:

- Event Speakers and Contact Information
- Event Outline and Schedule
- Content Description

PLEASE SUBMIT FORM TO:

APSS Meeting Department
Attn: SLEEP 2018
2510 North Frontage Road
Darien, IL 60561

Phone: (630) 737-9700
Fax: (630) 737-9789
Email: sleepmeeting@sleepmeeting.org