



2019 ASPHO Conference
Mailing List

New Orleans, LA | May 1-4, 2019

Pre-Show List Opportunity

We are offering you a chance to reach those who are pre-registered for the 2019 ASPHO Conference! This is a prime opportunity to introduce your organization to this influential market before the conference and plan to make personal contact with them on-site. Here is a perfect way to ask the attendees to stop at your display or visit your Symposium.

To order your list, complete the order form below and return it before **April 1, 2019** along with a sample of the mailing and full payment of **\$600** to:

American Society of Pediatric Hematology/Oncology
Attn: Rob Frey
8735 W Higgins Rd., Suite 300
Chicago, IL 60631
rpfrey@aspho.org
847/375-6470, Fax: 888/374-7259

(Please Print)

Organization: _____

Address: _____

City/State/Zip: _____

Submitted by: _____

Date: _____ Phone: _____ E-Mail: _____

Check Enclosed (payable to AAHPM) Check Number: _____

Credit Card: MasterCard Visa American Express Discover

Name on Card (please print): _____ Amount: \$ _____

Credit Card Number: _____ Expiration Date: _____

Signature: _____

NOTE: ASPHO must receive a sample of the mailing piece for review and approval before we send the list. The list will come in excel format, will include names and postal mailing addresses only, and will be sent to you via e-mail. **The list is for single use only.**

Cancellation Policy: In the event that the sponsor notifies the Association in writing of the intent to cancel the agreement after acceptance but prior to the list being sent, a full refund of monies received will be applied, minus a \$250 administrative fee plus any other miscellaneous costs ASPHO may have incurred. Full payment must be received before the list will be mailed.