

Primary Contact Person (logistics)

Title

Company

Address

City

State Zip Code Country

Phone Fax

Email Address Web Address

Accounts Payable Contact Person

Title

Phone Fax

Email Address

DEPOSIT AND PAYMENT REQUIREMENTS

A deposit of 50% total space fee is required with signed contract.

September 7, 2018: 100% of total space fee is due.

SPEAKING SESSION PREFERRED TIMESLOT SELECTION

Select three timeslots in order of preference (1, 2, 3). We will do our best to secure a timeslot of your choice; however, we cannot guarantee you will receive one of your preferred timeslots. Speaking timeslots are assigned on a first-come basis, according to when the application is received.

1.
2.
3.

KIOSK SELECTION

List top three choices in order of preference (1, 2, 3). We will do our best to secure the kiosk of your choice; however, we cannot guarantee you will receive one of your preferred spaces. Space is assigned on a first-come, first-serve basis, according to when the application is received.

1.
2.
3.

AUTHORIZING SIGNATURES

We have read, understand and accept the terms and conditions outlined in this document and agree to abide by all requirements, restrictions, and obligations outlined in the Terms and Conditions. Upon acceptance by HIMSS, the terms of this agreement are binding.

Authorized Signatory for Exhibiting Company

Print Name & Title

Signature

Date

Authorized Signature for HIMSS – HIMSS Office Use Only

METHOD OF PAYMENT: *Purchase orders are not an accepted form of payment.*

- ☐ Pay by wire or check made payable to HIMSS
- ☐ Pay by credit card by logging in to MYS portal
- ☐ Pay by credit card using HIMSS Credit Card Authorization Form and faxed back to HIMSS secure fax line at 312-915-9209