AFFILIATE MEETING SPACE APPLICATION

Required for ALL Meetings not part of IFSO 2021, including Hospitality Suites and Private Meetings. One form per event requested. By submitting this form, Company agrees to all rules and regulations contained in the IFSO 2021 Exhibitor Prospectus, including cancellation policy.



19-23 October, 2021 | Fontainebleau, Miami, Florida

Company:		
Contact Individual*:	Title:	
Mailing Address:		
City:	State, Postal Code:	
Telephone Number:	Fax Number:	
Email Address:		
*The person who is listed here will rece	ive all information and receipt for payment of fees.	
Affiliate Meeting (e.g. Hospitality Su	ite, Staff Meeting, Advisory Board Meeting, Investigator	r Meeting):
Title:	Type of Event:	
Date & Time:	# of attendees:	
Administrative Fee (Invoices will be	generated after review/approval by the IFSO 2021):	
☐ Non-profit, Academic, or Gover☐ Exhibitor/Sponsor Events: \$750☐ Non-Exhibitor/Sponsor Events:	per day	
Available Dates and Times:		
Tuesday, October 19, 2021: Wednesday, October 20, 2021: Thursday, October 21, 2021: Friday, October 22, 2021:	7:00AM-5:00PM, 7:00PM-10:00PM 7:00AM-5:00PM, 8:00PM-10:00PM 7:00AM-8:00AM, 6:00PM-10:00PM 7:00AM-8:00AM, 5:00PM-7:00PM	
of proposed invited attendees is requirementings which are in direct conflict w 2021. Companies who schedule any	ed during any time other than the above times. All meeting ed. All requests subject to review and approval. IFSO 202° th the programming, timing, or philosophy of IFSO 2021, meetings onsite at Fontainebleau, Miami, or offsite at FSO 2021's policy. Companies in violation will be penal	1 reserves the right to decline any or are in violation of any policy of IFSO any other location, during non-
This Affiliate Meeting Application r	nust be completed for EACH meeting being requested	d.
area on the invitation: "Although assig	who participate in these affiliate meetings, please include nment of space to hold this event has been approved by . This event is not affiliated with IFSO 2021 and IFSO 202 of this affiliate meeting."	/ IFSO 2021, the event has been
Name of Authorized Company Repre	sentative:	Date:
Signature:	Title:	
Payment Method: (select one)		
Check: Make payable to MeetingA 6001 Broken Sound Parkway NW,	dvice (Tax Identification Number: 38-4077616) & mail t Suite 340 Boca Raton, FL 33487	:o IFSO 2021 c/o MeetingAdvice,
Credit Card:		
Type of Credit Card:	Card Number:	
Name of Cardholder:	Expiration Date:	CVV Code [*] :