

# EXHIBIT AND SUPPORT PROSPECTUS

2020 VIRTUAL



December 10-12, 2020

## SUPPORT APPLICATION

### SUPPORT APPLICATION (Please read and sign pages 1 and 2):

My company would like to support the Conference with general support (see below for information on individual support opportunities).

<input type="checkbox"/> Platinum (\$25,000) <i>Exhibit and 6 registrations</i>	<input type="checkbox"/> Gold (\$20,000) <i>Exhibit and 5 registrations</i>	<input type="checkbox"/> Silver (\$15,000) <i>Exhibit and 4 registrations</i>	<input type="checkbox"/> Bronze (\$10,000) <i>Exhibit and 3 registrations</i>	<input type="checkbox"/> Supporter (\$5,000) <i>Exhibit and 1 registration</i>
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### SPECIAL FUNCTION SUPPORT PREFERENCES

- Industry Theaters (2 non-CME slots) — \$25,000
- Virtual Advisory Board Meeting time slot — \$10,000
- Online advertising (60-second video) on **Grand Rounds in Urology** — \$2,500
- Virtual SPCS 2020** meeting highlights webcast (support of selected online lectures) — \$40,000
- Virtual SPCS 2020** Satellite Symposium highlights printed and web publication as a supplement to *Grand Rounds in Urology* — \$30,000

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Please have an authorized party sign and date below to indicate your agreement with the terms and conditions contained in this Support Application. I agree with and accept the terms of this Support Application and in the Conference Support Terms and Conditions agreement, which is available at: <https://grandroundsinurology.com/conference-support-and-exhibition-terms-and-conditions/>

For (Print Applicant's Company Name): \_\_\_\_\_

By (Authorized Signature): \_\_\_\_\_

Print Name: \_\_\_\_\_ Title: \_\_\_\_\_

Date: \_\_\_\_\_

Organized by Carden Jennings Publishing Co., Ltd.  
in partnership with *Grand Rounds in Urology*



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Carden Jennings Publishing Co., Ltd.



## APPLICANT INFORMATION

### Applicant name and address *as it should appear in the Official Program*

Contact Name: \_\_\_\_\_

Title: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State/Province: \_\_\_\_\_ Zip/Postal Code: \_\_\_\_\_

Country: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Contact Signature: \_\_\_\_\_

## PAYMENT INFORMATION

All payments must be made in US dollars. Make checks payable to "Carden Jennings Publishing Co., Ltd." Please remit payments by **October 15, 2020**. Tax ID Number: 62-1460831

We agree to pay the TOTAL sum of (USD): \$ \_\_\_\_\_

- I will pay by check (please make payable to "Carden Jennings Publishing Co., Ltd.")
  - Please send me an invoice to process payment.
- I will pay by credit card (see details below)

## CREDIT CARD AUTHORIZATION, if applicable

Card Holder Name:	<input type="checkbox"/> Visa	<input type="checkbox"/> MasterCard	<input type="checkbox"/> American Express
Card #:	Expiration Date (MM/YY):	CWV Code:	
Signature:	Date signed:		

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Please forward completed form and payment to:

Marc Weathersby  
Carden Jennings Publishing Co., Ltd.  
375 Greenbrier Drive, Suite 100  
Charlottesville, VA 22901

Phone: 434-817-2000 • Fax 434-817-2020 • E-mail: marc@cjp.com

The undersigned Applicant hereby makes application to obtain from Carden Jennings Publishing Co., Ltd. (“Conference Management”) the commercial support preferences and special event support preferences selected in this Support Application (collectively, the “Services”). The Applicant acknowledges and agrees locations shall be assigned by Conference Management, in its own discretion. The Applicant acknowledges and agrees that, upon acceptance by Conference Management, this Support Application will become a contract between Conference Management and the Applicant for the provision of the Services and that the Services shall be provided subject to the terms of the standard Conference Support and Exhibition Terms and Conditions agreement, which is available at: <https://grandroundsinurology.com/conference-support-and-exhibition-terms-and-conditions/>.

Signature Agreeing to the Terms and Conditions of this Application and Agreement:

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_ Date: \_\_\_\_\_