



NANS Ancillary Event Request Form

Request Deadline: October 1, 2018

Events with 5 or more attendees will require the use of this form

If your company would like to obtain meeting or event space during the 22nd Annual Meeting, please review the Rules and Regulations below and complete this Ancillary Event Request Form. Requests will be reviewed weekly and approved on a first-come, first-served basis. As space is limited, be sure to submit requests as soon as possible. Please allow 10-15 business days for receipt of confirmation.

Rules and Regulations:

NANS refers to the North American Neuromodulation Society; "Companies/Organizations" refers to anyone requesting space on behalf of a company, university, non-profit or other entity. Any groups found in violation of these rules and regulations risk a loss of Priority Points and the ability to attend and participate in future meetings.

Hospitality and Entertainment. Ancillary event request form(s) must be completed to request hosting a hospitality or technology suite; events of any nature must be approved by the Society. No function may be scheduled to conflict with any Society programs, activity hours, or exhibit hours.

Companies must exhibit and or sponsor NANS to qualify for Ancillary Event Space Approval.

Fees: An application fee will be charged for each Ancillary Event Request Form submitted.

Event Organizer Fees: University/Non-Profit: **\$250** Exhibitor/Sponsor: **\$500**

1. Companies may not contract space directly with Caesars Palace or The LINQ Resort & Casino. Any groups found contracting directly without prior permission from NANS risk a loss of Priority Points and the ability to attend and participate in future meetings.
2. Companies may not secure space for poster and/or educational presentations, fundraising activities of any kind, including those that benefit NANS without prior approval. If you are requesting space for a symposium, please complete the NANS Breakfast and Lunch Symposium Request Form.
3. **Black-Out Times:** Organizations may NOT hold functions during the defined "black-out" times, unless pre-approved by NANS. NANS will strictly enforce the black-out times. Functions are defined as anything that could be interpreted as negatively impacting attendance of the NANS sanctioned events. NANS Function Auditors will be intermittently making visits to insure compliance.
 - Thursday, January 17, 2018: 7 am – 8:30 pm
 - Friday, January 18, 2018: 7 am – 7 pm
 - Saturday, January 19, 2018: 7 am – 6 pm
 - Sunday, January 20, 2018: 7 am - noon
4. Activities are restricted to the confines of the assigned hotel event rooms and suites and may not be held in public areas, including but not limited to, hotel lobbies or hallways, and sidewalks adjacent to the hotel or convention center. No signage may be publicly placed in hotel walkways, on doors or in any space that would draw meeting attendees from sanctioned events.
5. Any and all charges for services levied by the hotels and/or other venues are solely the responsibility of the function sponsor. NANS has no responsibility or authority over any charges, including, but not limited to; room rental, food and beverage minimums, audio visual pricing, internet charges, electric costs, etc. NANS will provide facility contact information in the approval letter. From that point forward, the organization will work directly with the assigned hotel to plan the event. Hotels will require organizations to sign a contract.
6. If a company is interested in securing space for an event/function at any other host city venue (off-site) they may contact the venue directly, but must first receive approval from NANS on the date, time, and content of the proposed event.
7. Your company can provide signage and event promotions based on the following restrictions: Up to 2 signs maximum, no larger than 22" x 28". Signage may only be placed in a NANS designated area within the North

Convention Center one hour prior to the event start time and must be removed within 30 minutes of the conclusion of the event. It is the applicant's responsibility to comply with NANS's policy as well as its selected hotel's policy concerning placement of signage. Any promotional signage, including hand-held, within the NANS meeting area including hallways, stairwells and escalators is prohibited without NANS written approval. In addition, any plans for promotion of the event must be submitted to NANS for approval by November 16, 2018.

8. Anyone involved in planning a function, must observe the NANS Rules and Regulations as listed. Your company is responsible for ensuring that all company representatives and/or agents adhere to all the rules and regulations outlined in the Ancillary Event Request Form. Violation of these rules may jeopardize future exhibiting status and/or the ability to hold future functions in conjunction with the NANS Scientific Sessions. In the event the company is unable to ensure conducting themselves professionally, NANS reserves the right to terminate any and all approvals.
9. Functions found to be in violation of these guidelines shall be immediately terminated. Your company waives any rights to claims of damages arising out of the enforcement of these guidelines.
10. Refund Policy & Fees: No refund of fees will be processed if a confirmation letter has already been sent. Cancelling an event with the hotel does not automatically cancel your event with NANS or entitle your company to a refund of fees paid. You may submit a single room/24 hour hold/multiple day request on one form at one single fee. However, if your request is for multiple rooms, over several days, with different hours and room sizes, each room request must be submitted separately and will be charged a separate fee. Your organization will be charged a fee for every request submitted. The fee will be charged once the room has been assigned. You will not be charged if meeting space is not available. Fees are in addition to room rental that may be charged by the facility.
11. All matters and questions not covered by the above guidelines are subject to the discretion of NANS. These NANS guidelines may be amended at any time by NANS, and all amendments shall be equally binding on all parties. In the event of any amendment or addition to these guidelines, written notice will be given by NANS to such parties. Your company shall protect, indemnify, hold harmless and defend NANS, its officers, directors, agents, volunteers, subcontractors, employees and/or representatives against all such claims, liabilities, losses, damages, judgments or settlements, including reasonable attorneys' fees and costs and other expenses incurred by the indemnifying party on account of litigation; provided that the foregoing shall not apply to injury, loss or damage caused by or resulting from the negligence of NANS, its officers, director, agents or employees.

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To be considered for approval for an ancillary event, the form must be filled out in its entirety. *ONE Request Form per Event.*

Company Information: (please type or print clearly)

Company Name: _____

Main Contact Name: _____ Title: _____

Address: _____

City: _____ State: _____ Zip: _____ Country: _____

Phone: _____ Fax: _____ Email: _____

Signature: _____

(Indicates you have read and agree to the rules and regulations of the NANS Guidelines)

Event Information:

Name of Event: _____

Event Date(s): _____ Start Time: _____ End Time: _____

Purpose/Description of Event: _____

Target Audience: _____

Number of Expected Attendance: _____

Name of Executive in charge (Director or Higher): _____

Email of Executive in charge (Director or Higher): _____

Name of On-Site Person in Charge: _____

Email of On-Site Person in Charge: _____

Contact Number On-Site: _____

Attendee Information:

Function is by invitation only Function is open to all NANS attendees Function is for staff only

Preferred Location:

Caesars Palace Other: _____

Room Set-up:

Conference Set U-shape Rounds

Classroom Set Hollow Square Reception

Theater Style (just chairs) Other: _____

(Please describe or attach diagram.)

Audio-Visual Requirements: _____

Minimum Square Footage: _____

Other Information: _____

Food & Beverage:

Please specify if you will be having one or more of the following meal functions. Any food & beverage order requiring all day long replenishing will need to be attached to the request.

Breakfast # _____ Lunch # _____ Dinner # _____ Reception # _____

Payment Information:

Please indicate application fee type: University/Non-Profit - \$250 Exhibitor/Sponsor - \$500

Visa MasterCard American Express Discover

Card Number _____ Exp. Date _____ V-Code (3-4 digits on back of card) _____

Billing Address: _____

City: _____ State: _____ Zip: _____

Name (exactly as it appears on the card) _____ Authorization Signature (required) _____ Date _____

(I authorize the total payment fee indicated on this form to be charged to my credit card.)

**Please return completed forms
to: Fax: 888.374.7259 or
Email: cschroll@neuromodulation.org**