



## Exhibitor Event/Meeting Room Request Form

*Please use one form per event request.  
All events must be approved by ACOG and are subject to space availability.*

**Booth #:** \_\_\_\_\_ **Application Date:** \_\_\_\_\_  
**Organization Name:** \_\_\_\_\_  
 \_\_\_\_\_  
**Activity Name:** \_\_\_\_\_  
 \_\_\_\_\_

### Event Details:

**Event Day:** \_\_\_\_\_ **Event Date:** \_\_\_\_\_  
**Event Start Time:** \_\_\_\_\_ **AM PM** **Event End Time:** \_\_\_\_\_ **AM PM**  
**Set-up Time: (What time do you want access to the room?)** \_\_\_\_\_ **AM PM**  
**Requested Location:**  San Diego Convention Center  Hilton Bayfront Hotel (HQ)  Omni San Diego  
 San Diego Marriott Marquis & Marina **Estimated Event Attendance:** \_\_\_\_\_

### Type of Activity:

Reception  Meeting  Meal & Meeting  Meal Only  Other (Specify) \_\_\_\_\_

### Requested Room Set-up:

Reception/cocktail rounds  Theater  Conference  Banquet  Classroom  Other: \_\_\_\_\_

### Equipment/AV (All A/V Charges are the responsibility of the organization planning the event)

Standing Lectern, No Microphone  Head table for \_\_\_\_\_ people  Screen  
 Standing Lectern with Microphone  Microphones for head table  Computer (Laptop)  
 Audience Microphones, # \_\_\_\_\_  Overhead Projector  iPad  
 Flip Chart & Markers, # \_\_\_\_\_  LCD Projector  Other: \_\_\_\_\_

### EVENT CONTACTS

The Pre-Event contact will receive the confirmation and all correspondence relating to the event request. The onsite contact will only be used onsite.

Pre-Event Contact	Onsite Contact
<b>Name:</b> _____	<b>Name:</b> _____
<b>Organization:</b> _____	<b>Organization:</b> _____
<b>Address:</b> _____	<b>Address:</b> _____
<b>City/State:</b> _____	<b>City/State:</b> _____
<b>Zip code:</b> _____	<b>Zip code:</b> _____
<b>Phone #:</b> _____	<b>Phone #:</b> _____
<b>Email:</b> _____	<b>Email:</b> _____

**Meeting Services Use Only**

Facility Assigned: \_\_\_\_\_  
 Room Name: \_\_\_\_\_  
 Day/Date: \_\_\_\_\_  
 Time: \_\_\_\_\_  
 Set-up: \_\_\_\_\_  
 Confirmation: \_\_\_\_\_

**American College of Obstetricians & Gynecologists  
Instructions and Policies**

**ACOG Policy**

All events must be approved by ACOG in advance. Organizations wishing to hold group activities in conjunction with the ACOG Annual Clinical & Scientific Meeting must complete an Event/Meeting Room Request Form, per each event.

It is ACOG's policy that any ancillary function held in conjunction with the ACOG Annual Clinical & Scientific Meeting must not conflict with official conference hours or events. ACOG reserves the right to refuse an event that conflict with any conference event. Events will not be allowed during educational sessions or exhibit show hours.

<b>Saturday, May 6<sup>th</sup></b> Before 8:00 AM After 5:30 PM	<b>Sunday, May 7<sup>th</sup></b> Before 8:00 AM After 4:30 PM	<b>Monday, May 8<sup>th</sup></b> Before 9:00 AM After 4:30 PM	<b>Tuesday, May 9<sup>th</sup></b> No Restrictions
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Preferred location or space is subject to availability and a room rental charge may apply.

**Confirmation**

The assigned facility, room, date and time will be confirmed to you, along with the name of the contact person for any food, beverage or audio visual needs.

**Special Arrangements**

It is the responsibility of the sponsoring organization to make all arrangements relative to menus, audio visual, décor, flowers, and payment with the facility's Banquet Department or Convention Services Department. These arrangements should be finalized at least 3-4 weeks prior to the activity date.

Payment of the event is the responsibility of the sponsoring organization and method of payment must be arranged in advance with the facility.

**Requests are subject to availability at the time of booking.**

**Please return as soon as possible for best availability to:**

Brittany Dismuke, *ACOG Exhibits Coordinator*, [bdismuke@acog.org](mailto:bdismuke@acog.org).