



685 Baltusrol Way
Bridgewater, NJ 08807
908-231-7552
fax: 908-231-6788
email: NJSOM@verizon.net

Enclosed you will find all the forms needed in order to participate in the New Jersey Society of Oncology Managers Annual Conference. This year it is being held at the Tropicana Hotel and Casino on October 8 – 9, 2009.

This year there will be no group dinner based on requests for additional individual practice networking time with exhibitors. Each exhibitor is encouraged, if they wish to meet with individual practices in a setting they deem appropriate after the meeting adjourns on Thursday afternoon.

*Please review the forms enclosed and complete those that apply and return them no later than September 11, 2009 to Rosellen Perlowitz. **Please return the Application and Contract for Exhibit Space immediately upon your decision to attend as exhibitors so we can begin the needed paperwork.** All other forms and monies are due by September 11, 2009. All booths are on a first come, first serve basis. Based on your companies' level of sponsorship the booth and/or a number of attendees may be free. Any questions as to what your company is entitled to just call or email Rosellen. If monies are required they must be received by September 11, 2009 – no booth will be issued without full payment. Booth fees do not include phone lines, internet or electric please see the forms in your packet from AEX Convention Services – these services must be arranged directly through the Tropicana using their forms. Please let us know if you require these services as well.*

A confirmation of sponsorship will be sent. In order to get a confirmation all paper work must be filled out and payment must be included. Again the deadline is September 11, 2009. Any reservations for a booth, monies or forms received after that date will incur a \$500.00 late fee payable prior to the meeting. Even if your booth is "free" all necessary forms must be returned by the deadline or no booth will be reserved and late fees will apply.

*The registration form with **ALL** members that will be attending the conference must be returned. Return only one form per company please be sure to contact any members of your company who may wish to attend. They must be listed on this form. Keep in mind we are not sending multiple copies out. If your company wants to participate this packet must be filled out and returned with payment (if needed). Also, if any members are not paid Allied members for 2009 the non member rate will apply. Free attendees are for 2009 Allied members only. You can not split attendance among representatives. A late registration fee of \$200*

will apply for any member registered after September 11, 2009. A no show fee of \$100 per day will apply for any member who does not cancel by October 2, 2009. No refunds for booths will be issued. These funds must be paid prior to any member of your company attend 2010 events. For those who wish to pay by credit card please use the enclosed form. Make as many copies as needed.

If you wish to stay at the Tropicana please see the enclosed hotel information. This is not included in your booth reservation.

We appreciate your generous contribution; it is with your continued support that we have been able to continue to improve our skills in the field of Hematology-Oncology.

Should you have any questions please feel free to contact Rosellen Perlowitz at 908-231-7552 or email us at NJSOM@verizon.net.

Thank you,

*Denise Johnstone
Conference Chairperson*

*Linda DeAngelis
Conference Co- Chairperson*

*Enclosed:
NJSOM Packet
AEX Conference Packet*

**NEW JERSEY SOCIETY OF ONCOLOGY
MANAGERS**
Tax ID # 22-349-0371
Application and Contract for Exhibit Space
October 8-9, 2009
Tropicana Hotel Casino & Resort
908 231 7552
fax: 908 231 6788

Please return immediately upon deciding to participate in this event.

Instructions: Complete all information listed below. Sign and return to: 908-231-6788 (fax) or NJSOM C/O Rosellen C. Perlowitz 685 Baltusrol Way Bridgewater, NJ 08807

1. This Agreement dated _____, 20_____

By _____ of _____
(Exhibitor)

For and in consideration of the mutual covenants and agreements hereinafter mentioned to be kept and performed by the parties hereto said parties agree as follows.

2. NJSOM agrees to permit Exhibitor to use and occupy the space hereinafter designated at the rental hereafter provided for the purpose of displaying at NJSOM Annual Conference to be held at the Tropicana Hotel Casino & Spa opening October 8th continuing through October 9th, 2009.
3. **Space Selection:** Space selection and placement of booths will be handled on a first come first serve basis. We have only 35 booths available therefore we are unable to accommodate any individuals who register late. Even if you are already entitled to a booth you must register.

Cost: See Attached

Price includes (8 x 10 booths)

- Pipe and Drape
- One 6' Draped Table
- Two Chairs
- Wastebasket
- Booth ID Sign
- Set up and removal of booth

Exhibitor information as you would like it to appear in our show directory: (Please print clearly)

Company Name: _____

City, State, Zip: _____

Phone Number: _____ Fax: _____

Email Address: _____

Contact Name and Title: _____

Product Line: _____

Signature: _____

Company Summary/Contact:

Please forward the name of a contact person with address, phone and email as well as a brief synopsis in 50 words or less of your company's mission/summary of services to be included in our program materials for our practice attendees. This needs to be received no later than **September 11th** if you wish for it to be included.

Liability: Exhibitor agrees to and does indemnify, hold harmless and defend, NJSOM from and against any and all liability, responsibility, loss, cost or expense of any kind whatsoever which may incur, suffer to put to, pay or be required to pay, incident to or arising directly or indirectly from any or omission by Exhibitor or any of its employees, or agents.

Cancellation: In the event that an exhibitor cancels space no refunds will be given. Space will not be held without receipt of this agreement and a check made payable to NJSOM by September 11th.

NOTE: Exhibit booths will not be considered reserved or held until full payment is received. All paperwork and payments must be received by **September 11, 2009** in order to take part as an exhibitor, **NO EXCEPTIONS WILL BE MADE.**

Please indicate below if you need phone, electric or internet outlets. Phone, electric and internet set up must be made by utilizing the forms in your packet. NJSOM takes no responsibility for setting up these services. Set up and payment is to be made directly with the Tropicana.

(We just need to know for our set up)

Internet Outlets **Phone Outlets** **Electric Outlets**

Installation and removal of Exhibits:

Complete details are included in this mailing.

Attire

Casual business attire is appropriate for all functions. You may wish to bring a sweater or jacket to the meeting because some registrants may find the room temperature cool. Please dress casual for the entertainment Thursday Evening.

Program Registration Fees

The registration fee includes tuition, program materials, two breakfasts, refreshment breaks, one lunch, and one cocktail hour.

Cancellation Policy

In accordance with the NJSOM Board of Directors, NO REFUNDS or Credits will be given.

Lodging

Tropicana Hotel and Casino
Reservations: 1-800-247-8767 mention New Jersey Society of Oncology
Room Rates: Group rate of \$ 98.00 per night plus 14% city sales tax and \$8.00 tourism fee. Other fees may apply.
Check in is 3 pm and Check out is 12 pm. After the September 11th deadline, reservations will be accepted on a space available basis only and room rate can not be guaranteed. All reservations must be guaranteed with a major credit card. The Tropicana will not hold your reservation unless it has been guaranteed.

NJSOM is not responsible for the booking or payment of the attendee's guest room. Attendees must book their

own room through the reservation department. Only a limited number of rooms are reserved for NJSOM Conference Attendees – please call early to insure you will get a room.

Directions

The Tropicana Casino & Resort
2800 Boardwalk, Atlantic City, NJ 08/401
www.tropicana.net

- **New York**
Take the New Jersey Turnpike to the Garden State Parkway (Exit 11). Proceed south on the Parkway to Exit 38 (Atlantic City Expressway). Take Atlantic City Express (East). At the base of the Atlantic City Expressway, take Exit 2 and follow signs to Tropicana Casino and Resort, Home of The Quarter. Continue straight onto Albany Ave. Turn left onto Pacific Avenue. Turn left at S Brighton Ave.
- **Philadelphia**
Cross the Benjamin Franklin Bridge or Walt Whitman Bridge and follow the North-South Freeway (Route 42) to the Atlantic City Expressway. Take Atlantic City Express (East). At the base of the Atlantic City Expressway, take Exit 2 and follow signs to Tropicana Casino and Resort, Home of The Quarter. Continue straight onto Albany Ave. Turn left onto Pacific Avenue. Turn left at S Brighton Ave.
- **Baltimore / Washington D.C.** Take I-95 North across the Delaware Memorial Bridge and follow Route 40 East to the Atlantic City Expressway. Take Atlantic City Express (East). At the base of the Atlantic City Expressway, take Exit 2 and follow signs to Tropicana Casino and Resort, Home of The Quarter. Continue straight onto Albany Ave. Turn left onto Pacific Avenue. Turn left at S Brighton Ave.



685 Baltusrol Way
Bridgewater, NJ 08807
908-231-7552
fax: 908-231-6788
email: NJSOM@verizon.net
www.NJSOM.org

NJSOM Annual Conference - October 8th -9th, 2009 Credit Card Registration Form

NJSOM is offering the opportunity of paying all fees by credit card. Below is the form that needs to be completed and returned if you wish to utilize this method of payment. This form needs to be returned by September 11th with your company's registration forms. After September 11th your card will automatically be charged the additional \$200 for individual late registration fee and a \$500 booth late fee. A \$100 per day no show fee will also apply if you register and fail to cancel by October 2nd. Fees are not refundable. These additional fees must be paid in full prior to any member of your company attending any 2010 events.

Name: _____

Company Name: _____

I authorize NJSOM to charge my credit card:

Check all that apply:

- \$ 1,500.00 Booth Fee (includes one allied attendee)
- \$ 300.00 x ____ 2009 Allied Member *please call Rosellen if you are not sure of your status.
- \$ 750.00 x ____ 2009 Non Member

I understand a total of \$ _____ will be charged to my credit card. Late fees and no show fees may also be attached if the deadlines stated above are missed.

Please print clearly:

Cardholders Name: _____

Type: AMEX MasterCard Visa

Credit Card Number: _____

Expiration Date: ____/____ Security Code: _____

Billing Address: (full including zip code) _____

Email Address: _____

Cardholders Phone Number: (w) _____ (c) _____

Authorized Signature

In the event your card is declined will be contacted and another method of payment can be arranged.
Feel free to make copies of this form for all individuals paying by credit card and attached them to the Vendor Registration form.



685 Baltusrol Way
Bridgewater, NJ 08807
908-231-7552
fax: 908-231-6788
email: NJSOM@verizon.net
www.NJSOM.org

NJSOM Annual Meeting Checklist

To NJSOM C/O Rosellen Perlowitz:

- Vendor Reservation Form
 - List of all attendees - all attendees on one form
 - Monies for booth if needed (\$1,500 -includes one attendee)
 - Monies for attendees if not included in 2009 support (\$300 for 2009 paid allied members, \$750 for non-members)
 - Pay by Credit Card Form (if applicable)
- Application and Contract for Exhibit Space
- Deadline: September 11, 2009

To Tropicana Hotel and Casino:

- Phone line, electric and/or internet rental please utilize the forms in your packet. These services are additional and all arrangements and payments directly handled by AEX Convention Services and/or Tropicana Hotel.
- Hotel reservations for all attendees - 1-609-340-4000
- Deadline: **September 11, 2009 for room reservations.**

To AEX Convention Services: (conference materials)

- All materials to be shipped will be accepted between **September 14th and October 6th**. If shipped and received prior to **September 23rd** a discount will apply. AEX packet contains all shipping particulars.
- Please see AEX's information packet for detailed shipping information and rates. All payments are to be made to AEX Convention Services.
- **The Tropicana will not accept any shipments prior to the night before the show.** Any packages sent prior to October 7th - 4:00 pm- 7:00 pm or October 8th - 7:00 am - 8:00 am the Tropicana, AEX and NJSOM will not take responsibility for being delivered or additional fees - there is limited storage at the hotel. All packages must have your companies name and "NJSOM Annual Conference" written clearly on them.

NJSOM will provide booth numbers - leave this blank on all forms