



**The Best of the 2019 San Antonio Breast Cancer Symposium
January 11, 2020
The Hotel at Avalon
Alpharetta, Georgia**

EXHIBITOR AND SPONSOR REGISTRATION FORM

Deadline: Friday, January 3, 2020

Company Name

Name of Contact Person

() _____

Phone

() _____

Fax

_____ E-mail address

Names, email addresses and phone numbers of those attending on behalf of the company, including contact person, if attending (use a separate sheet if necessary):

Name	E-mail Address	Phone No.	Please <input type="checkbox"/> if Attending Breakfast

Do you plan to exhibit? YES NO

(Exhibitors: \$3,000 per exhibit table | Sponsors: Included in annual corporate membership)

If yes, please check if you will require access to the following:

Electrical outlet Ethernet cable Wireless capability Other: _____

*Please e-mail completed registration form to acahill@medicalmanagement.com,
or send by regular mail to the address below.*

Exhibitors, payment of the exhibit fee can be made on-line or by phone using a credit card, or checks (made payable to GASCO) can be mailed to the address below. For questions or assistance with credit card payments, contact Anne Marie Cahill at (770) 951-8427.

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