

APPLICATION DEADLINE: FRIDAY, AUGUST 19, 2016

Organizations wishing to hold group functions in conjunction with ANESTHESIOLOGY® 2016, October 22–26 in Chicago, IL, must first obtain meeting space from ASA. Space is assigned after all official ASA®, ASA Governance and affiliated subspecialty functions have been placed. Space is reserved on a first-come, first-served basis in the order applications were received. Please submit one application for each meeting room requested along with Affiliate Agreement.

The function will be assigned from the designated facilities contracted within the ASA housing block. These facilities are instructed not to assign meeting space to affiliate organizations unless approval has been received from ASA. The affiliate organization and/or its agents will work directly with the assigned facility's convention service manager to coordinate arrangements pertaining to the proposed event.

It is the responsibility of the organizers hosting events to make sure that those events comply with the guidelines regulated by the ASA. Such events must be approved in advance by ASA, and are subject to the following **Terms and Conditions** of use:

1. Meetings/Functions may be conducted during the following hours outlined below:

Friday, October 21	Saturday, October 22	Sunday, October 23	Monday, October 24	Tuesday, October 25
6 a.m.–11 p.m.	6–8 a.m. After 7 p.m.	6–8 a.m. After 6 p.m.	6–8 a.m. After 6 p.m.	6–8 a.m. After 6 p.m.
	Official Affiliate Event Evening	**Foundation Fundraising/ Networking Event		

NOTE: ASA reserves the right to enforce subsequent schedule changes made by the AMOC Committee or by the chairs of ASA Committees. Ancillary organizers will be notified if their requested time must be changed.

****The Foundation Fundraising/Networking Event will take place during the evening of Sunday, October 23. This event is open to all attendees and will benefit the following Foundations: ASACF, FAER, WLM, AF. We encourage you not to overlap this event and will work with you to find alternate times.**

2. Meetings/Functions cannot conflict with ASA's educational programming. Educational programs that would take place during ASA program hours are conflicts, and space will not be assigned.
3. Affiliate social events may NOT include any presentation of educational or scientific content to meeting participants.
4. Once space is approved, an email confirming your space will be sent along with the facility information and the name of the facility convention service manager contact that will work directly with the organizer to finalize the meeting/function arrangements.
5. Requests for 24-hour hold on meeting space will not be honored or confirmed by ASA. Such requests will be determined at the discretion of the assigned facility.
6. Promotional materials associated with each meeting/function must first be submitted to ASA for review and final approval. All promotional materials for ancillary meetings must include the following statement: *This meeting is NOT an official program of ANESTHESIOLOGY 2016.* The name American Society of Anesthesiologists, the acronym ASA, ASA logo and the ASA Annual Meeting logo are registered trademarks of the American Society of Anesthesiologists. Use of the aforementioned in conjunction with promotional materials without the express written consent of ASA is prohibited.

Promotion of meetings is not permitted in/around the convention center, in the headquarter facilities, or through "room drops." ASA does not provide its mailing list for ancillary meeting use. Limited, modest, on-site directional signage for ancillary meeting attendees is allowed. Signage must be specific; signs should clearly state the name and location of the event and should be professional in nature.
7. Any and all costs for services levied by the assigned facility (*meeting space rental, catering, audio visual, etc.*) or other contracted vendors associated with the affiliate organization and/or its agents meeting/function are the sole responsibility of the organizer. ASA is not responsible for payment of any services connected with the event.
8. Organizations will be notified via email when their application has been received. All groups will be notified in **mid-May** of meeting space approval and assigned facility placement. Please do not contact ASA by call or email prior to mid-May.
9. Organizations that contact facilities on their own or otherwise attempt to circumvent ASA ancillary meeting space assignment process are subject to denial.
10. ASA reserves the right to accept, reject or condition acceptance, based on ASA's sole discretion, for any reason, which need not be disclosed to the organization. All outstanding obligations to ASA by the organization, including payment of all debts must be fulfilled prior to space assignment.
11. The organization shall protect, indemnify, hold harmless and defend ASA, its officers, directors, agents, members and employees against all such claims, liabilities, losses, damages and expenses, including reasonable attorneys' fees and costs of litigation, resulting from the organization's negligence or willful misconduct; provided that the foregoing shall not apply to injury, loss or damage caused by or resulting from the negligence of ASA, its officers, directors, agents, members or employees.

ASA has the full authority to interpret or amend these rules at its sole discretion. All decisions will be final. Affiliates agree to abide by any Terms and Conditions that may hereafter be adopted. All matters or questions not covered by the above Terms and Conditions are subject to the discretion of ASA. These Terms and Conditions may be amended at any time by ASA, 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 ASA to such parties.

SIGNATURE OF AGREEMENT

This application form is used to apply for function space approval. You will receive an email confirmation from the ASA Schaumburg office regarding your application. In the event the ASA approves your application, by signing below you agree to the Terms and Conditions outlined in the above Ancillary Meeting Space Request Affiliate Application and not to use the ASA or ANESTHESIOLOGY 2016 names or logos in the promotion of this meeting/function. By approving your application, the ASA does not endorse or sanction your meeting/function, and no such relationship should be inferred by your affiliate organization and/or its agents or implied to your meeting/function participants.

Authorized Contact (Print Name)

Authorized Contact - Approved By Signature

Organization/Company Name

Date

CONTACT INFORMATION (required)

Organization/Institution/Company Name

Ancillary/Affiliate Contact Person

Address

City State Zip

Phone Fax

E-Mail

MEETING/FUNCTION TYPE

Events affecting the ANESTHESIOLOGY 2016 Annual Meeting attendees, who are outside of the educational programming, including but not limited to:

- Committee Meeting | Board Meeting | Alumni Reception | Reception/Dinner

- Check here if this meeting/function is educational in nature.
 Check here if this meeting/function has an invited speaker to present.

If checked, please identify _____

- Check here if marketing materials will be produced for this function/meeting.
ASA requires review of all marketing materials prior to production and distribution for the proposed event.

PREFERRED MEETING/FUNCTION SPECIFICATIONS

Meeting/Function Name








Meeting/Function - Description/Purpose

Meeting/Function Date Start Time End Time Expected Number of Attendees

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Preferred Meeting Location (please list three, in order of preference)

PREFERRED MEETING/FUNCTION ROOM SET

- | | | | | | | |
|--|---|---|---|--|---|---|
| <input type="checkbox"/> Conference
 | <input type="checkbox"/> Hollow Square
 | <input type="checkbox"/> U-Shape
 | <input type="checkbox"/> Classroom
 | <input type="checkbox"/> Theatre
 | <input type="checkbox"/> Banquet
 | <input type="checkbox"/> Reception
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|--|---|---|---|--|---|---|

Questions? Contact:

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NOTE: Final facility assignment will be based on availability.

<p>ASA OFFICE USE ONLY:</p> <p>Date form received: _____</p> <p>Date request approved: _____</p> <p>Assigned Facility: _____</p> <p>Approved By: _____</p>
