

The Liver Meeting®



Product Theater Application

PRODUCT THEATER SELECTION

<input type="text"/> Concurrent Product Theater: \$40,000	<input type="text"/> Pre-Recorded Product Theater (included)
<input type="text"/> Non-Compete Product Theater: \$60,000	<input type="text"/> Live Product Theater (\$10,000 additional)

APPLICANT INFORMATION

Program Title					
Contact Name		Title			
Address		City, State, Zip			
Country		Phone		Email Address	

SPACE REQUEST

	TIME SLOT	FRIDAY, NOVEMBER 13	SATURDAY, NOVEMBER 14	SUNDAY, NOVEMBER 15
	1	1:00PM-1:30PM ET	1:00PM-1:30PM ET	1:00PM-1:30PM ET
	2	1:30PM-2:00PM ET	1:30PM-2:00PM ET	1:30PM-2:00PM ET
	3	4:30PM-5:00PM ET	4:30PM-5:00PM ET	4:30PM-5:00PM ET
	4	5:00PM-5:30PM ET	5:00PM-5:30PM ET	5:00PM-5:30PM ET

Please list your preferred timeslot:
 Every effort will be made to accommodate requests; however, no guarantees can be made. Space will be assigned on first come, first serve basis.

1)	2)	3)	4)
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Entities you **prefer** not to be scheduled against:

1)	2)	3)	4)
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DISCLAIMER AND SIGNATURE

By submitting this application, the organizer acknowledges understanding of AASLD's Product Theaters Guidelines and agrees to abide by them and the TLMdX® Exhibitor Contract Terms & Conditions.

Signature		Date	
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**Submit this form along with all materials by September 15, 2020 to:
 Heather Cooney – hcooney@asld.org**

For office use only	Application received: _____	Payment received: _____	Date: _____
Acct code: 4745-42020	Agreement received: _____	Space Assigned: _____	