

## TLM THEATER APPLICATION

PRESENTATION SELECTION										
30-Minute Presentation: \$40,00								45-N	Minute Presentation: \$50,000	
APPLICANT INFORMATION										
Program Title										
Industry Supporter						(	Contact Name			
Em	nail					F	Phone			
Ad	dress						City, State, Zip & Country			
Communications Company (if applicable)						(	Contact Name			
Email						F	Phone			
PREFERRED TIMESLOT										
	TIME SLOT	LEN	NGTH	FRIDAY, NOVEMBER	R 15	SUNI	DAY, NOVEMBE	17	MONDAY, NOVEMBER 18	
	SLOT 1	45 N	linutes	10:00 AM-10:45 A	M	10	DIE		10:00 AM-10 AM	
	SLOT 2 30 Mi		linutes	nutes None		eni u		12 COLU M		
	SLOT 3 30 M		linutes	utes None			2000		1:3 - z:00 PM	
	SLOT 4 45 Minut		linutes	3:30 PM-4:15 PM			+:15 PM		3:30 PM-4:15 PM	
<i>NEW!</i> Friday TLM Theaters will take place in meeting rooms on the second floor of the San Diego Convention Center.										
Please list your preferred timeslot and date.										
Every effort will be made to accommodate requests; however, no guarantees can be made. Space will be assigned										
on a first come, first serve basis. The AASLD Exhibit Hall will have two (2) concurrent TLM Theaters.										
1)			2)				3)			
Competitors you <b>prefer</b> not to be scheduled against:										
1) 2)								3)	3)	
INDUSTRY PROGRAMMING GUIDE ADVERTISEMENT (OPTIONAL ADD-ON)										
Back Cov S010. vailable): \$7,500 Full Page Ad: \$5,000 Half Page Ad: \$3,000									Half Page Ad: \$3,000	
DISCLAIMER AND SIGNATURE										
By submitting this application, the supporter acknowledges and agrees to comply with AASLD's TLM Theater Rules &										
Regulations and The Liver Meeting® Exhibitor Contract Terms & Conditions. Upon signature of the TLM Theater										
Application, the agreement is binding, even if the supporter has not yet paid.										
Signature								Date		