

**APPLICANT INFORMATION**

Program Title			
CME Provider			
Communications Company			
Contact Name		Title	
Address		City, State, Zip & Country	
Email		Phone	
Industry Supporter		Contact Name	
Email		Phone	

**PREFERRED TIMESLOT (RANK 1-6)****90-minute Lunch Slot at the Colorado Convention Center (\$65,000)**

12:00-1:30PM Thursday, November 5th	12:30-2:00PM Friday, November 6th	12:30-2:00PM Saturday, November 7	12:30-2:00PM Sunday, November 8th
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**120-minute Dinner Slot at Hotel (\$60,000)**

6:00-8:00 PM Thursday, November 5	6:30-8:30 PM Saturday, November 7 (note: conflicts with AASLD & AASLD Foundation Awards Gala)
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**PROGRAM SPACE REQUEST**

Anticipated Audience Size:	Catering: <input type="checkbox"/> Yes <input type="checkbox"/> No	Type of service: (buffet, plated)
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Room Setup Requested:  Theater  Classroom  Crescent Rounds  Rounds  Other:Competitors you **prefer** not to be scheduled against:**PROGRAM DETAILS**Select the research type that best relates to your program:  Basic  Clinical  Translational

Select the Target Audience(s) for your program:	<input type="checkbox"/> Basic Scientists	<input type="checkbox"/> Associates/APPs	<input type="checkbox"/> Program Directors
	<input type="checkbox"/> Clinical Hepatologists	<input type="checkbox"/> Pediatric Hepatology	<input type="checkbox"/> Surgeons
	<input type="checkbox"/> Gastroenterologists	<input type="checkbox"/> Pharmacists	<input type="checkbox"/> Transplant Coordinators

## PROGRAM DETAILS

Select the track(s) that best relate to your program:

<input type="checkbox"/> Acute Liver Failure and Artificial Liver Support	<input type="checkbox"/> Hepatitis: Other Infections
<input type="checkbox"/> Acute on Chronic Liver Failure	<input type="checkbox"/> Hepatobiliary Neoplasia
<input type="checkbox"/> Advanced Practice Providers (NP, PA, RN, PharmD, etc.)	<input type="checkbox"/> Hepatotoxicity
<input type="checkbox"/> Alcohol-Associated Liver Diseases: Clinical and Experimental	<input type="checkbox"/> Human Cholestatic and Autoimmune Liver Diseases
<input type="checkbox"/> Biliary Physiology, Transport, Cholangiocyte Biology, and Experimental Cholestasis	<input type="checkbox"/> Inflammation and Immunobiology
<input type="checkbox"/> Cell and Molecular Biology	<input type="checkbox"/> Liver Fibrogenesis and Non-Parenchymal Cell Biology
<input type="checkbox"/> Genomics and Precision Medicine	<input type="checkbox"/> Liver Transplantation and Liver Surgery
<input type="checkbox"/> Gut Liver Axis and Microbiome	<input type="checkbox"/> MASLD and MASH
<input type="checkbox"/> Health Disparities	<input type="checkbox"/> Metabolic and Genetic Disease
<input type="checkbox"/> Health Services and Public Health Research	<input type="checkbox"/> Pediatric Hepatology
<input type="checkbox"/> Hepatitis B	<input type="checkbox"/> Portal Hypertension and Other Complications of Cirrhosis
<input type="checkbox"/> Hepatitis C	<input type="checkbox"/> Vascular Liver Disease, Hemostasis and Thrombosis

## PROPOSALS MUST INCLUDE THE FOLLOWING

<input type="checkbox"/> Application	<input type="checkbox"/> Program Abstract
<input type="checkbox"/> Learning Objectives	<input type="checkbox"/> Program Agenda
<input type="checkbox"/> Marketing Plan for Symposium	<input type="checkbox"/> Proposed Faculty (Names & Credentials)

## INDUSTRY PROGRAMMING GUIDE ADVERTISEMENT (OPTIONAL ADD-ON)

<input type="checkbox"/> Back Cover Ad \$9,000	<input type="checkbox"/> Full Page Ad \$5,500	<input type="checkbox"/> Half Page Ad \$3,000
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## DISCLAIMER AND SIGNATURE

By submitting this application, the organizer acknowledges receipt of AASLD's guidelines and restrictions regarding industry-supported satellite symposia and agrees to abide by them.

Signature

Date