

2025 INDUSTRY EXPERT SESSION APPLICATION

Meeting Dates: September 3 – 6, 2025 Exhibit Dates: September 3 – 6, 2025 George R Brown Convention Center, Houston, Texas

Contact Information				
Sponsor Name:				
Contact:				
Phone:	E-Mail:			
Address:	City:	State:	Zip Code:	
Meeting Planner/Other Coordinatin	g Organization Information			
Company Name:	_Contact:			
Phone:	E-Mail:			
Address:	City:	State:	Zip Code:	
Program Information				
Program Title:				
Presenter's Name:	Ti	tle:		
Cancer Focus:ABCLALL (Please note: Application will not be accepte	_AMLCLLCMLCTH d without Cancer Focus)	ILIBCLMCL	MDSMM _	MPNTCL
Preferred Program Dates and Times	;			
Please rank 3 slots with 1 being your first Thursday, September 04, 2025 Breakfast (\$75,000) Lunch (\$100,000)	Friday, September 05, 2025	Dinner (<mark>\$75,000)</mark>	Saturday, Septembe Breakfast <mark>(\$75,</mark>	
Signature				
I acknowledge that as an authorized will comply with the Policies for E understand that Sponsors must boo Annual Meetings, including a surch Sponsor's authorized signature and S	xhibitors and Other Organizations k housing through SOHO and failure harge of 10% on the exhibit space	at SOHO Meetings a to do so is subject to	available on https://separation https://separation.https://se	oho.click/2025. I and future SOHO
Sponsor Signature:		Date:		
Printed Name:	Ti	tle:		
Payment Methods				
Credit Card Payment - American	Express, MasterCard, Visa, Discover	(<mark>a 4% surcharge will b</mark>	e applied to all credit	<mark>: cards</mark>)
Card Number:		Expiration:	C	CCV Code:
Name (on the credit card):		Amou	unt to be charged:	
Billing Address:				
	harged for the total amount due (including th Cardholder is responsible for any changes in		/ENANT reserves the right t	to charge the correct

□ Invoice – JWC Covenant will invoice, payable directly to JWC Covenant, Inc. net 30 days.