

AACR DRUG DISCOVERY AND DEVELOPEMENT (AACR D3)

Official Application for Exhibit Space

July 21-24, 2026 • Exhibit Dates: July 22-23, 2026

General Information

Company Name

Contact

Street Address

City State/Province

Zip/Postal Code

Telephone

Email

Signature Date

Note: Please direct all further correspondence to (if different from above):

Company Name

Contact

Email

Rules and Regulations

The undersigned agrees to abide by all Terms and Conditions listed in the Prospectus, and restrictions and regulations as set forth in this agreement or as may be especially designated by the AACR, the Sheraton Boston Hotel and the city of Boston, MA. Failure to abide by such rules and regulations results in forfeiture of all monies paid or due AACR under terms of this agreement.

See Terms and Conditions for complete list of rules and regulations.

Exhibit Space

1. Total number of booths requested (limit 2 booths): _____

2. List any exhibitor applicant wishes to be near.

3. List any exhibitor applicant does not wish to be near.

4. Are you a first-time exhibitor?

Yes No

Fees and Booth Sizes (US Dollars)

100% of the payment is due upon receipt of invoice (net 30).

10' x 10' Booth Space: \$4,000.00

10' x 10' Non-profit: \$1,000.00

Booths assigned on a first come first serve basis.

Method of Payment

The undersigned agrees to pay 100% of the rental fee upon receipt of invoice. (Applications will not be confirmed until deposits are received.)

Check or money order enclosed payable to the American Association for Cancer Research, drawn on a U.S. bank.

Total Amount: \$ _____

Mail Payment in US Dollars to: AACR Exhibits
c/o American Association
for Cancer Research®
615 Chestnut Street
17th Floor
Philadelphia, PA 19106
Attention: Finance Department