AACR American Association for Cancer Research

ANNUAL MEETING 2027

Satellite Educational Symposia Application

April 2-7, 2027 • Orange County Convention Center • Orlando, Florida

Application submission deadline: **January 13, 2027** | Applications will not be processed without deposit.

Applicant Information

Program Title

Program Director Name

CME Provider

Sponsoring Organizer Company Name

Contact Name

Title

Address

City State/Province

Zip/Postal Code Country

Email Address

Phone

Industry Supporter Company Name

Address

City State/Province

Zip/Postal Code Country

Space Request

(Every effort will be made to accommodate requests.)

Preferred Dates

Saturday, April 3_____

Sunday, April 4_____ Tuesday, April 6_____

Monday, April 5_____

Anticipated size of audience: _____

Food service planned: □ Yes □ No

Set-up requested:

□ Theater □ Conference □ Classroom

□ Reception □ Rounds

□ Other _____

Will your program include a virtual component or enduring materials? □ Yes □ No

(Evening slots only; suggested time 6:30 p.m.–8:30 p.m.)

Please rank your preferred dates from 1-3 with 1 being the highest.

Proposals Must Also Include the Following:

□ Target Audience

□ Program Abstract

□ Professional Practice Gaps and Needs Assessment

□ Learning Objectives

□ Names and Credentials of Proposed Faculty

□ General Plan for Marketing the Symposium

□ Non-refundable Deposit of $5,000 (total fee: $40,000)

NOTE: If accepted, final payment is due by February 4, 2027.

Disclaimer and Signature

By submitting this application, the organizer acknowledges understanding of the AACR's guidelines and restrictions regarding Satellite Educational Symposia and agrees to abide by them.

Signature Date

Payment Information

Upon receipt of the application an invoice will be sent to you for the **non-refundable deposit of $5,000.00**. Upon approval of your application an invoice will be sent for the **balance $35,000.00**. Final payment and signed letter of agreement is due on February 4th.

Submit this form along with all materials and deposit by **January 13, 2027,** to:

Attn: Coleen McMahon

615 Chestnut Street, 17th Floor
Philadelphia, PA 19106

Email: coleen.mcmahon@aacr.org

FOR OFFICE USE ONLY

Application received: _____ Deposit received: _____ Staff initial: _____

Agreement received: _____ Balance received: _____ Staff initial: _____

Space assigned: _____