



(973) 597-0938 PHONE (973) 597-0241 FAX

EXHIBIT REGISTRATION
Wednesday, October 20, 2021
The Manor Restaurant, West Orange, NJ

FIRM NAME: _____

CONTACT PERSON: _____ TITLE: _____

ADDRESS: _____

FAX _____ PHONE _____

EMAIL _____

REPRESENTATIVES THAT WILL ATTEND THE MEETING:

EXHIBIT FEE: \$850.00

_____ Check will be sent on _____

SPECIAL REQUIREMENTS:

_____ My company will need an electrical outlet.

Please list any additional requirements you may need:

A confirmation of reserved space will be sent to you upon receipt. Checks must be received by October 8, 2021.

Please make checks payable and mail completed form to:

Oncology Society of New Jersey
100 South Jefferson Road
Suite 204
Whippany, NJ 07981