

NCCN

2026

Annual Congress:

# Hematologic Malignancies™

September 18 – 19, 2026  
New York Marriott Marquis  
New York, NY



## Exhibit Dates

September 18 – 19, 2026

## Application Deadline

July 31, 2026

## Reservation Forms Included

Sponsor Level Application  
Headshot Photo Station Sponsorship Application  
Exhibit Space Application (Tabletops Only)  
Product Theater Application  
Advertising and Door Drop Order

**NEW!**



[exhibits@nccn.org](mailto:exhibits@nccn.org)  
[NCCN.org/hem](https://NCCN.org/hem)

# SPONSOR & EXHIBITOR PROSPECTUS



The NCCN 2026 Annual Congress and related activities are planned to be held as “hybrid” events on September 18 – 19, 2026 to include live (in-person) sessions and a virtual option. The live sessions will be held at the New York Marriott Marquis, New York, NY and simultaneously, a virtual platform will be provided where certain activities/sessions will be offered for remote attendance.

During the NCCN 2026 Annual Congress world-renowned experts in the management of hematologic malignancies will present the latest treatment advances, updates to the standard of care as recommended in the NCCN Guidelines®, and present unique and challenging patient cases. Chaired by Andrew D. Zelenetz, MD, PhD, Memorial Sloan Kettering Cancer Center, this program features presentations and interactive discussions highlighting the treatment options and supportive care for a variety of hematological malignancies.



**Attendees**

This Congress will attract more than 500 (estimated 325 in-person and 175 virtually) attendees including oncologists (in both community and academic settings), physician assistants, nurses, pharmacists, patient advocates, and other health care professionals involved in the care of patients with hematologic malignancies.

**Exhibits**

NCCN is dedicated to offering exhibit opportunities that provide value to our sponsors and serve as informative features for our attendees. The exhibit fee includes a tabletop exhibit, digital profile, and other benefits. Once the exhibit application is received, information regarding the virtual exhibit will be provided.

**Past NCCN Exhibitors**

AbbVie  
ADC Therapeutics  
Amgen  
Association of Community Cancer Centers (ACCC)  
Astellas  
AstraZeneca  
BeiGene  
Bristol Myers Squibb  
Cancer Support Community  
Eli Lilly and Company  
Genmab  
GSK

Hairy Cell Leukemia Foundation  
Incyte  
International Waldenstrom’s Macroglobulinemia Foundation (IWMF)  
Ipsen  
Janssen Biotech  
Karyopharm Therapeutics  
Kite, a Gilead Company  
Merck & Co., Inc.  
MorphoSys  
National Marrow Donor Program/  
Be the Match  
Novartis  
Pfizer Oncology

Pharmacyclics, an Abbvie Company  
PharmaEssentia  
Prothena  
Rigel Pharmaceuticals  
Seagen  
Servier  
Taiho Oncology, Inc.  
The Leukemia & Lymphoma Society  
Young Adult Survivors United

**Attendee Registration List**

NCCN does not rent or share the attendee registration list.



**Congress and Exhibit Dates**

September 18 – 19, 2026  
New York Marriott Marquis, New York, NY



**Agenda**

For the most up-to-date version, visit [NCCN.org/hem](https://www.nccn.org/hem)

# Commercial Sponsor Levels

NCCN is pleased to invite organizations to be commercial sponsors of the NCCN 2026 Annual Congress. Sponsor levels are Platinum, Gold, Silver, and Bronze. Reach your key audience of NCCN attendees by increasing visibility and supporting NCCN through these opportunities.

	Bronze \$25,000	Silver \$40,000	Gold \$50,000	Platinum \$75,000
Recognition listing on NCCN.org/hem home page with link to sponsor-provided website.	*	*	*	*
Recognition listing with link to sponsor-provided website under Sponsor tab on virtual meeting platform that will host the Congress.	*	*	*	*
Recognition listing on Exhibit Hall signage, door drops, table tents, and other printed items.	*	*	*	*
Number of complimentary registrations for the NCCN 2026 Annual Congress	2	4	6	8
Number of complimentary custom ads in the NCCN Exhibit Guide.	1 page	2 pages	3 pages	4 pages
Recognition listings included on NCCN eBulletin ads to run prior to the Congress.	*	*	*	*



**Congress and Exhibit Dates**  
 September 18 – 19, 2026  
 New York Marriott Marquis, New York, NY

 **Agenda**  
 For the most up-to-date version, visit [NCCN.org/hem](https://NCCN.org/hem)

# Exhibitor Schedule

	Date	Time*
Exhibitor Registration and Set-up	Friday, September 18, 2026	10:00 – 11:45 AM
Exhibit Hall	Friday, September 18, 2026	11:45 AM – 3:25 PM
Welcome Reception	Friday, September 18, 2026	5:30 – 7:00 PM
Exhibit Hall	Saturday, September 19, 2026	7:00 AM – 12:30 PM
Exhibit Dismantling	Saturday, September 19, 2026	12:30 – 1:30 PM

\*Times subject to change.

## Exhibit Hall Location

New York Marriott Marquis  
Astor Ballroom - 7th Floor  
1535 Broadway  
New York, NY

## Space Assignment

Space is assigned as applications are received. Sponsors and Corporate Council members are given premium exhibit placement. This is a tabletop only event.

## Booth Activity

NCCN must be informed of and approve any intent to conduct a drawing, provide a demonstration, distribute free samples or any other activity to take place during show hours. Submit requests to [exhibits@nccn.org](mailto:exhibits@nccn.org) by Friday, July 31, 2026.

## Payment

Method of payment must be indicated on exhibit space applications. Full payment must be received (30) days prior to exhibition date.

## Cancellation

For a full refund, notification of space cancellation must be received in writing on or before Friday, July 31, 2026.

## Refund Schedule

**Through July 31, 2026 – Full Refund**  
**After July 31, 2026 – No Refund**

## Blackout Times

NCCN requests that all sponsors, exhibitors, or non-sponsors respect the intent of this event. Therefore, any non-NCCN events, whether on the event property or off-premises but within the city limits, that might potentially draw participants from registered attendees, faculty, or speakers of the NCCN 2026 Annual Congress are prohibited. NCCN appreciates the understanding and cooperation of all entities involved, for any questions regarding this policy, please email: [exhibits@nccn.org](mailto:exhibits@nccn.org)

**The blackout times for this event are:**  
**Friday, September 18, 2026 beginning at 12:00 PM to**  
**Saturday, September 19, 2026 ending at 4:00 PM.**  
Thank you.



## Congress and Exhibit Dates

September 18 – 19, 2026  
New York Marriott Marquis, New York, NY



## Agenda

For the most up-to-date version, visit [NCCN.org/hem](http://NCCN.org/hem)

# Exhibitor Information

## Exhibit Hall Includes:

- **Tabletop Displays** – Tabletop only, industry-sponsored exhibits offer premium exposure to attendees.
- **Patient Advocacy Pavilion** – An area for advocacy groups to exhibit and provide patient information.
- **NCCN Booth**– Attendees learn about new resources and programs, receive free giveaways, and return completed Exhibitor Passports.
- **Food and Beverage** – Breakfasts, lunches, and break refreshments are served buffet style.

## Exhibitors Receive:

- A digital profile is included with the purchase of physical exhibit space. Features of the digital profile will be provided.
- Complimentary Congress Registrations\* – **see “Exhibitor Registrations” below**
- One (1) identification sign, one (1) 6’ draped table, two (2) chairs, and one (1) trash can.
- A 100-word company description, placement on floor plan listing, and discounted advertising rates in the printed and digital versions of the NCCN Exhibit Guide.
- Fully carpeted exhibition areas.
- Free Wi-Fi provided by NCCN.

## Tabletop Exhibit Fee – \$10,000

## Exhibitor Registrations\*

- (6) Annual Congress registrations
- (4) Exhibit Hall Only registrations (no access to Congress materials)

**Notice About Exhibit Hall Only Registrations** – Exhibit Hall Only (EHO) registrations are generously provided to all exhibitors for personnel who will be setting-up, staffing, or dismantling an exhibit. EHO badges do not provide access to educational sessions. All attendee badges are electronically scanned as attendees enter a session room. If, during the Congress, an EHO badge holder wishes to attend a session, they can visit the Registration counter where their registration will be upgraded to a Full Congress Attendee with appropriate fees applied.

## Age Requirement

All Congress Attendees and Exhibit Hall Only Attendees must be 21 years of age or older.

## NCCN Room Block Information

NCCN has a room block reserved at the New York Marriott Marquis. For more information on reserving a room, please visit [NCCN.org/hem](https://www.nccn.org/hem).

## Important Announcement Regarding Hotel Accommodations for the NCCN Annual Congress

– It has come to the attention of NCCN that in the past, fraudulent reservation companies have approached our supporters, exhibitors, and Congress attendees with offers of hotel rooms at discounted rates. These companies are in no way affiliated with NCCN or the New York Marriott Marquis nor are they often legitimate companies. Please do not share your personal or financial information with these companies, or proceed with booking any reservations for the NCCN Annual Congress through these companies.

Booking through the New York Marriott Marquis, ensures a legitimate reservation and that your credit card and personal information is secure. If you are contacted by anyone asking if you need a room reservation for the NCCN Annual Congress, or if they represent themselves as the “NCCN Housing Provider,” please get their information and contact the NCCN Conferences and Meetings Department immediately at [conferences@nccn.org](mailto:conferences@nccn.org).

NCCN cannot be held responsible for guests choosing accommodations outside of our official room block. Thank you!



## Congress and Exhibit Dates

September 18 – 19, 2026

New York Marriott Marquis, New York, NY



## Agenda

For the most up-to-date version, visit [NCCN.org/hem](https://www.nccn.org/hem)

# Sponsor Level Application & Contract

Date: \_\_\_\_\_

## Sponsor Information (please type or print clearly)

Organization \_\_\_\_\_  
Contact Name \_\_\_\_\_  
(Name of person who will be responsible for your sponsorship and to whom all future correspondence should be sent.)  
Title \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Phone \_\_\_\_\_  
Email (required) \_\_\_\_\_  
Signature required for contract \_\_\_\_\_

## Billing Information (if different from above)

Organization \_\_\_\_\_  
Contact Name \_\_\_\_\_  
Title \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Phone \_\_\_\_\_  
Email (required) \_\_\_\_\_

## Recognition Information

Sponsor name \_\_\_\_\_  
(Use upper and lower case letters exactly as you want your organization's name to appear on congress materials.)  
Sponsor website \_\_\_\_\_  
(to link to Sponsor name on virtual platform)

## Sponsor Level

\$25,000 – Bronze Level       \$40,000 – Silver Level       \$50,000 – Gold Level       \$75,000 – Platinum Level  
Total: \$ \_\_\_\_\_

## Payment Information

Please send an invoice  
 Check: (Please make checks payable to: National Comprehensive Cancer Network and mail to: NCCN, 3025 Chemical Road, Suite 100, Plymouth Meeting, PA 19462 Attn: Accounting Department)  
 Credit Card:       American Express       Discover Card       MasterCard       Visa  
Cardholder's Name: \_\_\_\_\_  
Billing Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Card Number: \_\_\_\_\_  
Expiration Date \_\_\_\_\_ Verification Number: \_\_\_\_\_  
Signature \_\_\_\_\_ Date \_\_\_\_\_

NCCN may charge the credit card for the amount as indicated above.

Please provide any additional information needed regarding agreements, purchase orders, etc.

### Instructions

Reserve your sponsorship by completing this form and submitting it by Friday, July 31, 2026. You will receive an email confirming receipt of your application and details concerning your sponsorship.

### Cancellation penalties

Through Friday, July 31, 2026 – Full refund  
After Friday, July 31, 2026 – No refund

### Send completed application to:

Jennifer Tredwell, MBA  
Senior Vice President  
Marketing and Communications  
NCCN  
3025 Chemical Road, Suite 100  
Plymouth Meeting, PA 19462  
Phone – 215.690.0274  
[exhibits@nccn.org](mailto:exhibits@nccn.org)

**NEW!**

# Headshot Photo Station Sponsorship

Date: \_\_\_\_\_

Become a sponsor of this new feature in the Congress Exhibit Hall! Attendees will be able to upgrade their professional brand by stopping by and getting a complimentary, studio-quality, professional headshot from a professional photographer. This opportunity is open to three separate sponsors.

## Sponsor Information (please type or print clearly)

Organization \_\_\_\_\_

Contact Name \_\_\_\_\_

(Name of person who will be responsible for your sponsorship and to whom all future correspondence should be sent.)

Title \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone \_\_\_\_\_

Email (required) \_\_\_\_\_

Signature required for contract \_\_\_\_\_

## Billing Information (if different from above)

Organization \_\_\_\_\_

Contact Name \_\_\_\_\_

Title \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone \_\_\_\_\_

Email (required) \_\_\_\_\_

## Recognition Information

Sponsor name \_\_\_\_\_

(Use upper and lower case letters exactly as you want your organization’s name to appear on congress materials.)

**Sponsor Fee**     \$5,000

Total: \$ \_\_\_\_\_

## Payment Information

Please send an invoice

Check: (Please make checks payable to: National Comprehensive Cancer Network and mail to: NCCN, 3025 Chemical Road, Suite 100, Plymouth Meeting, PA 19462 Attn: Accounting Department)

Credit Card:     American Express     Discover Card     MasterCard     Visa

Cardholder’s Name: \_\_\_\_\_

Billing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Card Number: \_\_\_\_\_

Expiration Date \_\_\_\_\_ Verification Number:: \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

NCCN may charge the credit card for the amount as indicated above.

Please provide any additional information needed regarding agreements, purchase orders, etc.

### Instructions

Reserve your sponsorship by completing this form and submitting it by Friday, July 31, 2026. You will receive an email confirming receipt of your application and details concerning your sponsorship.

### Cancellation penalties

Through Friday, July 31, 2026 – Full refund

After Friday, July 31, 2026 – No refund

### Send completed application to:

Jennifer Tredwell, MBA  
Senior Vice President  
Marketing and Communications  
NCCN  
3025 Chemical Road, Suite 100  
Plymouth Meeting, PA 19462  
Phone – 215.690.0274  
[exhibits@nccn.org](mailto:exhibits@nccn.org)

# Exhibit Space Application and Contract Tabletop

## Sponsor Information (please type or print clearly)

Organization \_\_\_\_\_  
Contact Name \_\_\_\_\_  
(Name of person who will be responsible for your sponsorship and to whom all future correspondence should be sent.)  
Title \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Phone \_\_\_\_\_  
Email (required) \_\_\_\_\_  
Signature required for contract \_\_\_\_\_

## Billing Information (if different from above)

Organization \_\_\_\_\_  
Contact Name \_\_\_\_\_  
Title \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Phone \_\_\_\_\_  
Email (required) \_\_\_\_\_

## Promotional Information

Organization Name for Congress Materials \_\_\_\_\_  
  
(Use upper and lower case letters exactly as you want your organization's name to appear on congress materials.)

## Space Reservations

\$10,000 – Tabletop Exhibit  
Total: \$ \_\_\_\_\_

## Payment Information

Please send an invoice  
 Check: (Please make checks payable to: National Comprehensive Cancer Network and mail to: NCCN, 3025 Chemical Road, Suite 100, Plymouth Meeting, PA 19462 Attn: Accounting Department)  
 Credit Card:     American Express     Discover Card     MasterCard     Visa  
Cardholder's Name: \_\_\_\_\_  
Billing Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Card Number: \_\_\_\_\_  
Expiration Date \_\_\_\_\_ Verification Number:: \_\_\_\_\_  
Signature \_\_\_\_\_ Date \_\_\_\_\_

NCCN may charge the credit card for the amount as indicated above.

Please provide any additional information needed regarding agreements, purchase orders, etc.

### Instructions

Reserve your sponsorship by completing this form and submitting it by Friday, July 31, 2026. You will receive an email confirming receipt of your application and details concerning your sponsorship.

### Cancellation penalties

Through Friday, July 31, 2026 – Full refund  
After Friday, July 31, 2026 – No refund

### Send completed application to:

Jennifer Tredwell, MBA  
Senior Vice President  
Marketing and Communications  
NCCN  
3025 Chemical Road, Suite 100  
Plymouth Meeting, PA 19462  
Phone – 215.690.0274  
[exhibits@nccn.org](mailto:exhibits@nccn.org)

# Exhibit Space Application and Contract Tabletop

Continued from previous page

## FIRE AND SAFETY REGULATIONS

As an exhibitor, you must comply with safety, fire, and health ordinances that apply to the New York, state of New York. All displays, exhibit materials, and equipment must be reasonably located and protected by safety guards and fireproofing to prevent fire hazards and accidents. Electrical wiring must conform to all federal, state, and municipal government requirements and to National Electrical Code Safety Rules.

## AUXILIARY AIDS OR SERVICES

In compliance with the Americans with Disabilities Act (ADA), NCCN wishes to ensure that no individual with a disability is excluded, denied services, or otherwise treated differently from other individuals. Each exhibitor shall be responsible for compliance within its exhibit space, including the provision of auxiliary aids and services needed.

## LIABILITY

Each exhibitor assumes the entire responsibility and hereby agrees to protect, defend, indemnify, and save NCCN and New York Marriott Marquis, its owners, its operator, and each of their respective parents, subsidiaries, affiliates, employees, officers, directors, and agents harmless against all claims, losses, or damages to persons or property, governmental charges or fines and attorney’s fees arising out of or caused by its installation, removal, maintenance, occupancy, or use of the exhibition premises or a part thereof.

## INSURANCE

NCCN and the New York Marriott Marquis will not be liable for damage or loss to the exhibitor’s property through theft, fire, accidents, or any other cause. NCCN and New York Marriott Marquis will not assume liability for any injury that may occur to visitors, exhibitors or their agents, employees, or others. Exhibitors shall obtain and keep in force during the term of the installation and use of the exhibit premises, policies of Comprehensive General Liability Insurance, and Contractual Liability Insurance, insuring and specifically referring to the Contractual liability, in an amount not less than \$2,000,000 Combined Single Limit for personal injury and property damage.

NCCN and New York Marriott Marquis shall be included in such policies as additional insureds. In addition, the exhibitor acknowledges that neither NCCN nor the New York Marriott Marquis, its owners, or its operator maintains insurance covering exhibitor’s property and that it is the sole responsibility of the exhibitor to obtain business interruption and property damage insurance insuring any losses by the exhibitor.

To register for this Congress, please sign below acknowledging on behalf of you and your company that you have received and read the attached terms and accept and agree to be bound by these terms as a condition to the registration.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Print Full Name \_\_\_\_\_

Email \_\_\_\_\_

Organization Name \_\_\_\_\_

### Instructions

Reserve your sponsorship by completing this form and submitting it by Friday, July 31, 2026. You will receive an email confirming receipt of your application and details concerning your sponsorship.

### Cancellation penalties

Through Friday, July 31, 2026 – Full refund  
After Friday, July 31, 2026 – No refund

### Send completed application to:

Jennifer Tredwell, MBA  
Senior Vice President  
Marketing and Communications  
NCCN  
3025 Chemical Road, Suite 100  
Plymouth Meeting, PA 19462  
Phone – 215.690.0274  
[exhibits@nccn.org](mailto:exhibits@nccn.org)

# Product Theater Presentation Application and Contract

## Application and Contract

Reach your target audience by giving a non-CE, promotional presentation during the NCCN 2026 Annual Congress. These in-person presentations will be 25 minutes with 5 minutes for a brief Q&A. They will be scheduled throughout the two days of the Congress and take place during breaks. This format is appropriate for product theaters or similar content. Sponsors specify topic and provide the speaker. Topics must be approved by NCCN. All Product Theaters are also available to virtual attendees.

### Sponsor Information (please type or print clearly)

Organization \_\_\_\_\_

Contact Name \_\_\_\_\_  
(Name of person who will be responsible for your sponsorship and to whom all future correspondence should be sent.)

Title \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone \_\_\_\_\_

Email (required) \_\_\_\_\_

Signature required for contract \_\_\_\_\_

### Billing Information (if different from above)

Organization \_\_\_\_\_

Contact Name \_\_\_\_\_

Title \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone \_\_\_\_\_

Email (required) \_\_\_\_\_

### Presentation Topic or Title (if available)

\_\_\_\_\_

\_\_\_\_\_

(Use upper and lower case letters exactly as you want your organization's name to appear on congress materials.)

### Fee

\$42,000 – 25-minute presentation with 5 minutes for Q&A. Available dates and times will be provided.

Total: \$ \_\_\_\_\_

### Payment Information

Please send an invoice

Check: (Please make checks payable to: National Comprehensive Cancer Network and mail to: NCCN, 3025 Chemical Road, Suite 100, Plymouth Meeting, PA 19462 Attn: Accounting Department)

Credit Card:       American Express       Discover Card       MasterCard       Visa

Cardholder's Name: \_\_\_\_\_

Billing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Card Number: \_\_\_\_\_

Expiration Date \_\_\_\_\_ Verification Number: \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

NCCN may charge the credit card for the amount as indicated above.

Please provide any additional information needed regarding agreements, purchase orders, etc.

\_\_\_\_\_

\_\_\_\_\_

# Advertising Insertion Order

## Hotel Door Drops

Invite attendees to visit your booth, promote a service, or build brand awareness through the use of a door drop. Have your custom printed piece delivered directly to the hotel rooms of NCCN Congress attendees.

## Exhibit Guide Advertising

Advertising in the NCCN Exhibit Guide provides uncommon exposure to influential oncologists, nurses, pharmacists, and other health care professionals. The NCCN Exhibit Guide will be posted on [NCCN.org/hem](http://NCCN.org/hem) and inserted in the Congress bag and distributed to all Congress attendees. Additional copies are displayed in the exhibit hall and foyers.

Ad Sizes	Width	Height
Half Page Horizontal	8"	5"
Full Page - Run of Book & Covers	8.5"	11"

**Insertion order due**

Friday, August 21, 2026

**Artwork due**

Friday, August 28, 2026

## Reproduction Requirements:

The following digital file types are accepted: JPG, PNG  
 Vector artwork should be saved in an .EPS format with fonts save as outlines and images embedded. We will substitute with similar fonts if originals are not submitted.  
 The following digital file types are NOT accepted formats:  
 Powerpoint, Word, Publisher, Excel, Freehand, Corel Draw, Paint

## Advertiser Information (please type or print clearly)

Organization \_\_\_\_\_  
 Contact Name \_\_\_\_\_  
 (Name of person who will be responsible for your sponsorship and to whom all future correspondence should be sent.)  
 Title \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
 Phone \_\_\_\_\_  
 Email (required) \_\_\_\_\_

## Exhibit Guide Ads

- \$1,500/ad Full Page Exhibitor
- \$2,000/ad Full Page Non-Exhibitor
- \$4,000/Inside Front Cover
- \$5,000/ad 2-5 Forward Placement
- \$8,000/Back Cover

## Door Drops

Sponsor provided printed piece will be delivered to all NCCN room block attendees.  
 \$5,000 Door Drop - Thursday evening

## Pre-Congress Non-CE Digital Ads

- \$5,000 (3) Square Ads

**Total: \$** \_\_\_\_\_

## Payment Information

Please send an invoice  
 Check: (Please make checks payable to: National Comprehensive Cancer Network and mail to: NCCN, 3025 Chemical Road, Suite 100, Plymouth Meeting, PA 19462 Attn: Accounting Department)  
 Credit Card:       American Express       Discover Card       MasterCard       Visa  
 Cardholder's Name: \_\_\_\_\_  
 Billing Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Card Number: \_\_\_\_\_  
 Expiration Date: \_\_\_\_\_ Verification Number: \_\_\_\_\_  
 Signature \_\_\_\_\_ Date \_\_\_\_\_

NCCN may charge the credit card for the amount as indicated above.

Please provide any additional information needed regarding agreements, purchase orders, etc.

## Sponsor and Exhibit Opportunities

Jennifer Tredwell, MBA  
Senior Vice President, Marketing and Communications  
215.690.0274  
[tredwell@nccn.org](mailto:tredwell@nccn.org)

## Support Opportunities

Beth Gaffney, MBA  
Vice President, US & Global Business Development  
215.690.0226  
[gaffney@nccn.org](mailto:gaffney@nccn.org)

## NCCN Member Institutions: [NCCN.org/CancerCenters](https://www.nccn.org/CancerCenters)

**Abramson Cancer Center at the University of Pennsylvania**  
Philadelphia, PA

**Case Comprehensive Cancer Center/ University Hospitals Seidman Cancer Center and Cleveland Clinic Taussig Cancer Institute**  
Cleveland, OH

**City of Hope National Medical Center**  
Duarte, CA

**Dana-Farber Cancer Institute**  
Boston, MA

**Duke Cancer Institute**  
Durham, NC

**Fox Chase Cancer Center**  
Philadelphia, PA

**Fred & Pamela Buffett Cancer Center**  
Omaha, NE

**Fred Hutchinson Cancer Center**  
Seattle, WA

**Huntsman Cancer Institute at the University of Utah**  
Salt Lake City, UT

**Johns Hopkins Kimmel Cancer Center**  
Baltimore, MD

**Indiana University Melvin and Bren Simon Comprehensive Cancer Center**  
Indianapolis, IN

**Mass General Brigham Cancer Institute**  
Boston, MA

**Mayo Clinic Comprehensive Cancer Center**  
Phoenix/Scottsdale, AZ; Jacksonville, FL; and Rochester, MN

**Memorial Sloan Kettering Cancer Center**  
New York, NY

**Moffitt Cancer Center**  
Tampa, FL

**O'Neal Comprehensive Cancer Center at UAB**  
Birmingham, AL

**Robert H. Lurie Comprehensive Cancer Center of Northwestern University**  
Chicago, IL

**Roswell Park Comprehensive Cancer Center**  
Buffalo, NY

**Siteman Cancer Center at Barnes-Jewish Hospital and WashU Medicine**  
St. Louis, MO

**St. Jude Children's Research Hospital/ The University of Tennessee Health Science Center**  
Memphis, TN

**Stanford Cancer Institute**  
Stanford, CA

**The Ohio State University Comprehensive Cancer Center - James Cancer Hospital and Solove Research Institute**  
Columbus, OH

**The UChicago Medicine Comprehensive Cancer Center**  
Chicago, IL

**The University of Texas MD Anderson Cancer Center**  
Houston, TX

**UC Davis Comprehensive Cancer Center**  
Sacramento, CA

**UC San Diego Moores Cancer Center**  
La Jolla, CA

**UCLA Jonsson Comprehensive Cancer Center**  
Los Angeles, CA

**UCSF Helen Diller Family Comprehensive Cancer Center**  
San Francisco, CA

**University of Colorado Cancer Center**  
Aurora, CO

**University of Michigan Rogel Cancer Center**  
Ann Arbor, MI

**University of Wisconsin Carbone Cancer Center**  
Madison, WI

**UT Southwestern Simmons Comprehensive Cancer Center**  
Dallas, TX

**Vanderbilt-Ingram Cancer Center**  
Nashville, TN

**Yale Cancer Center/Smilow Cancer Hospital**  
New Haven, CT

The National Comprehensive Cancer Network® (NCCN®) is a not-for-profit alliance of leading cancer centers devoted to patient care, research, and education. NCCN is dedicated to defining and advancing quality, effective, equitable, and accessible cancer care and prevention so all people can live better lives. Through the leadership and expertise of clinical professionals at NCCN Member Institutions, NCCN develops resources that present valuable information to the numerous stakeholders in the health care delivery system. By defining and advancing high-quality cancer care, NCCN promotes the importance of continuous quality improvement and recognizes the significance of creating clinical practice guidelines appropriate for use by patients, clinicians, and other health care decision-makers around the world.

World-renowned experts from NCCN Member Institutions diagnose and treat patients with a broad spectrum of cancers and are recognized for dealing with complex, aggressive, or rare cancers. NCCN Member Institutions pioneered the concept of the multidisciplinary team approach to patient care and conduct innovative research that contributes significantly to understanding, diagnosing, and treating cancer. NCCN programs offer access to expert physicians, superior treatment, and quality and safety initiatives that continuously improve the effectiveness and efficiency of cancer care globally.