



Guidelines

1. The **Sponsor** will provide the proposed virtual Non-CE Symposium/Webinar information to the AANN Executive Office for consideration. This information will include:
 - Title of program
 - Abstract text description of 50 words or less for use in AANN symposium/webinar promotion***Sponsor will be notified regarding approved topics within 5 business days.***
2. AANN will assign an appropriate time for the virtual symposium/webinar for a maximum of 60 minutes.
3. **The Sponsor** is responsible for all program development and speaker selection. Sponsor is responsible for all costs associated with the development and implementation of the virtual symposium/webinar session, the development and distribution of materials as well as payment of honoraria and expenses directly to the speaker(s).
4. **The Sponsor** is responsible for all marketing costs and stand-alone brochures advertising the symposium/webinar. AANN will provide a listing in the AANN calendar of events on the AANN website. AANN also offers opportunities to send an e-blast at an additional cost.
5. **The Sponsor** is responsible for collecting presentation materials from the speaker(s) which can be posted on the AANN website along with any handouts.
6. The symposia/webinar will live on the AANN website for up to 6 months.
7. AANN must pre-approve all advertising for the symposium/webinar and provide such approval in writing to the Sponsor.
8. **Fee** - \$30,000 (*nonrefundable at the time of signed Agreement*).
9. No cancellations after application is received.

Advertising Regulations

1. All advertising for the symposium/webinar must be approved by AANN in writing prior to distribution.
2. AANN does not endorse any virtual Non-CE Symposia/webinar and therefore no indication should be made in the advertising or promotion that AANN endorses the symposium/webinar.



Virtual Non-CE Symposia/Webinar Application

Sponsoring Organization Name: _____

Title of Program: _____

For use in AANN website materials -*please submit a company logo and a 50-word description of the program electronically to astokes@aann.org with application.*

Request Date: _____

Contact information:

Contact Person _____ Title _____

Company Name _____

Address _____

City, State _____ Zip/Postal Code _____ Country _____

Telephone _____ Fax _____ E-mail Address _____

Date received: _____ (Topic will be reviewed within 5 business days of receipt)

Approval Signature: _____ Date: _____

Request Denied Signature: _____ Date: _____

Reasons: ☐ Topic Not Appropriate for audience ☐ Requested time slot not available

Payment information: You may pay by check or credit card.

\$30,000 USD ☐ Check # _____

☐ Credit Card # _____ Expiration Date: _____

Card Holder Name: _____ Credit Card Type: _____

Signature: _____

Return this form to: Adrienne Stokes, AANN Manager, Professional Relations
via email at: astokes@aann.org.