



New England
Society of Allergy
Founded in 1956

www.newenglandsocietyofallergy.org

COMMERCIAL SUPPORT ADHERENCE POLICY AGREEMENT
All exhibitor forms must be received by 10/13/21

Date _____

Company Name: _____ Company Tax ID #: _____

Item/Drug Promoting: _____

Corporate Contact Email: _____

NESA 2021 Spring and Fall Programs:

FALL PROGRAM - October 20, 2021 – Online Meeting with links to sponsored content

SPRING PROGRAM – TO BE ANNOUNCED AT A LATER DATE

SPONSORSHIP FEES: \$1000 Fall 2021 Virtual Meeting

Payment Options (Send this completed form along with payment)

1) Make payment directly on the NESA website:

<http://www.newenglandsocietyofallergy.org/meetings/exhibitors/>

and **email** this form to nesocietyallergy@gmail.com.

SUBJECT LINE: INDUSTRY AGREEMENT- FALL 2021

2) Mail a check payable to “**NESA**”

New England Society of Allergy
c/o Jordan Scott, MD

79 Erdman Way, Suite 101, Leominster, MA 01453

and **email** this form to nesocietyallergy@gmail.com.

SUBJECT LINE: INDUSTRY AGREEMENT- FALL 2021

Does your company pay via a 3rd party vendor? YES NO

Name of 3rd party vendor: _____

I (we) understand and agree to adhere to the policies and procedures outlined in the Standards for Commercial Support of New England Society of Allergy’s (NESA) Continuing Medical Education established by the NESA CME committee in accordance to ACCME Standards for Commercial Support guidelines.

Signature of commercial representative