

## MEETING ROOM AVAILABILITY

Meeting space will be assigned on a first-come, first-served basis. A non-refundable application fee must be received before the meeting room request is processed. All companies agree to abide by the “Meeting Room Rules and Regulations”.

## MEETING ROOM RENTAL

**Hotel Meeting Space** – A limited number of meeting rooms are available at the ACG Headquarters hotel, the Omni Nashville. If a different hotel is preferred, please contact that hotel directly to book meeting space. Note that all meeting space must be approved prior to booking. The hotel will contact ACG directly for approval.

**Meeting Application Fee** – A \$200 fee per meeting room/per day (or fraction of a day) must be received **before** the application is processed. The application fee is non-refundable.

## MEETING ROOM RULES & REGULATIONS

1. All companies applying for a meeting room must have a separate exhibit booth at ACG 2026; however, there is no minimum size requirement.
2. Meeting rooms are intended to be used for staff meetings and/or client conferences. Meetings must be limited to 25 HCPs while the ACG educational sessions are in progress.
3. Meeting rooms cannot be utilized for educational sessions. Companies must secure an Exhibitor Product Theater or symposium time slot for educational programs.
4. The exhibitor is responsible for the ordering and payment of all furniture, AV equipment, services, food and beverage and other rentals for the meeting room. All requests are the sole responsibility of the exhibitor.
5. The subletting, assignment, or apportionment of the whole or of any part of space by any exhibitor is prohibited. No exhibitor may permit any other party to exhibit or meet in his or her meeting space any goods other than those manufactured or handled by the contract exhibitor or permit the solicitation of business by others within the space.
6. The safekeeping of the exhibitor’s property shall remain the responsibility of the exhibitor. Exhibitors should not leave valuable materials or equipment in the meeting rooms when no one is present. If security is required in your meeting room during or after normal conference hours, you may contract directly with ACG’s security contractor for that service.
7. Any booth cancellation will automatically result in cancellation of the meeting room. Cancellation fees may apply.
8. The applicant agrees to abide by all rules and regulations, requirements and restrictions as set forth in the Exhibitor Rules & Regulations manual.
9. No video recording in meeting rooms, including by media, may be done without prior written permission from the ACG. Detailed description of what will be recorded along with information on where and when the recording will be displayed must accompany all requests. Failure to notify the College may result in penalties.
10. Failure to abide by these rules and regulations will result in the forfeiture of all monies paid.



# MEETING ROOM REQUEST FORM

Music City Center

Nashville, TN

October 9-14, 2026

Exhibit Dates: October 11-13, 2026

## MEETING ROOM REQUEST FORM

**Meeting space is reserved for exhibitors and fills quickly, so please submit your request as early as possible.**

Please fill out **one** form per meeting and return to Elaine McCubbin at [emccubbin@gi.org](mailto:emccubbin@gi.org)

### Company Information

This is Request # ..... of ..... total meetings/events (please submit a separate form for each meeting/event)

Company Name ..... Contact Phone .....

Contact Name ..... Contact Email .....

### Payment Information

A \$200 fee per meeting room/per day (or fraction of a day) must be received **before** the application is processed. The application fee is non-refundable.

Accepted credit cards: Amex, MasterCard and Visa. A service fee of 4% will be applied to each credit card payment.

Please list the Exhibiting Company Name (no third-party names) and indicate *Meeting Space* in the Payment Notes when entering payment through our secure payment [link](#).

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### Meeting Information (please submit **one** form for each meeting/event)

Meeting Name.....

Meeting Date.....

Start Time.....End Time.....

Total Number of Attendees (including HCPs).....Number of HCPs.....

Room Setup (select one)

Conference  Banquet  Theater  Classroom  Reception  Hollow Square  U-Shape

Food and Beverage  Yes  No

Audio Visual  Yes  No

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Special Needs or Comments: