



**GEORGIA SOCIETY OF CLINICAL ONCOLOGY  
2026 CORPORATE PARTNERSHIP COMMITMENT FORM**

Company Name: \_\_\_\_\_  
Address: \_\_\_\_\_ Suite: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Phone No.: \_\_\_\_\_ Primary Contact Name: \_\_\_\_\_  
Fax No.: \_\_\_\_\_ Primary E-mail Address: \_\_\_\_\_

**Additional Contact(s)**

Name	Phone No.	E-mail Address

**Please select one of the following Corporate Partnership/Exhibitor options:**

- Level I-Platinum Corporate Partnership - \$40,000
- Level I Corporate Partnership - \$27,500
- Level II Corporate Partnership - \$17,000
- Level III Corporate Partnership - \$13,000
- Level IV Corporate Exhibitor – on a per meeting basis - \$7,500

**Return Commitment Form no later than December 31, 2025 to Peter F. Lyle, Sr.  
via e-mail to: [pflsr@medicalmanagement.com](mailto:pflsr@medicalmanagement.com),  
fax to: 770-951-2157, or by mail to the address below.**

**GASCO prefers all funding payments be made by ACH or EFT payment. If a check must be mailed, it should be made payable to the Georgia Society of Clinical Oncology and sent by some form of trackable mail (FedEx, UPS, USPS Express Mail).**

**\*IMPORTANT NOTE: Deadline for receipt of annual corporate partnership funding is January 31, 2026.**

**Mailing address:**  
3330 Cumberland Blvd., Suite 650  
Atlanta, GA 30339

**GASCO is a 501(c)(6) Non-Profit Corporation  
The Non-Profit Tax Identification Number for GASCO is 58-1752866**