

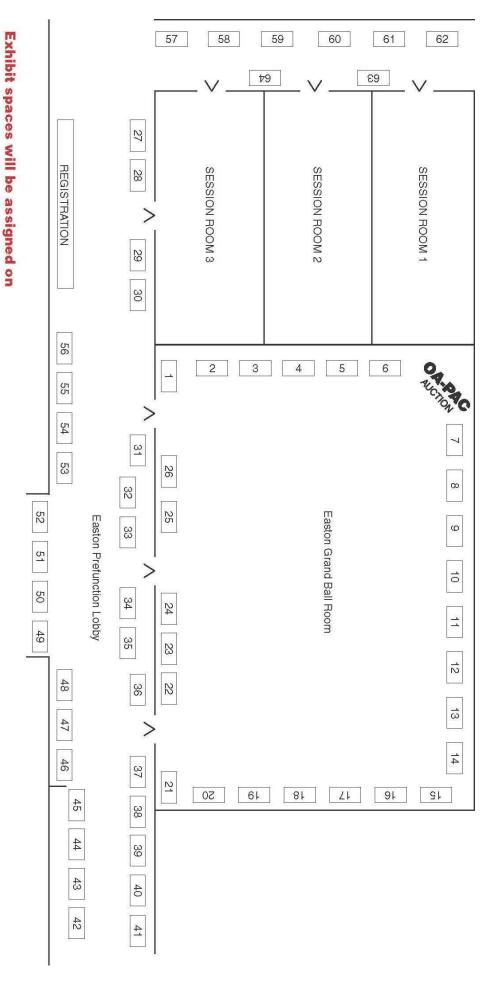
EXHIBIT REGISTRATION

OAIMA Annual Meeting & Trade Show Thursday – Friday, November 17 & 18, 2016

(TYPE OR PRINT THIS INFORMATION) Company Name: Individual responsible for Exhibit: _____ Address: _____ City, State, Zip: Phone including area code _____ E-mail: _____ Booth Choice #1 Booth Choice #2 Booth Choice #3 Received on or Before Oct. 24th Received After Oct. 24th \$595 \$625 Your Exhibit Fee includes: √ 1 (one) Registration Fee ✓ 1 (one) Ticket to all Meal Functions √ 1(one) ticket to the Thursday night Reception ✓ Your Company will be Recognized as a Reception Sponsor ✓ Your Company will contributor to the cash door prizes awarded on Friday. Do you require a 6' Table? Yes ____ Will you require two chairs? Yes Yes ____ Will you need electricity? Yes ____ how many: # ____ Will you need easels? **Registration and Payment Options:** ✓ REGISTER ONLINE HERE ✓ Return this form with check made payable to:

- OAIMA, 162 N. Hamilton, Gahanna, OH 43230
- ✓ Print this form, fill it out and fax back to the OAIMA Office at (614) 428-7919 or scan and email to: dawnh@oaima.org

Due to Hotel Commitments No Refunds will be made after 10/24/2016



a first come first serve basis

List which exhibit space you would like

First Choice

Exhibit Area Layout

Second Choice

Third Choice

Spaces 57-61 are available across from the session rooms