



REGISTRATION

2025 Silica Safety Conference

Attendee Name(s): *(Please type or print, as you want the name to appear on the name badge)*

1. _____
2. _____
3. _____
4. _____
5. _____

TOTAL AMOUNT: _____

Company Name: _____

Phone #: _____ **Email:** _____

REGISTRATION FEE: \$95.00 per person (Deadline is May 9, 2025)

LOCATION: Cherry Valley Hotel & Conference Center
2299 Cherry Valley Rd SE, Newark, OH 43055

HOTEL RESERVATIONS: [Cherry Valley Reservation Link](#) or Call (740) 788-1200

****Mention 2025 Spring Safety Conference to get \$139 Rate.**

PAYMENT OPTIONS:

✓ **Return this Form with Check made Payable to:**
OAIMA, 746 Morrison Rd., Gahanna, OH 43230

✓ **Pay with Credit Card:**
Email Form to dawnh@oaima.org

Name on Card: _____

Billing Address : _____

VISA MASTERCARD DISCOVER AE

_____ EXP. ____ / ____ S.C. _____