

Oregon EMS Conference 2019 - Exhibitor Registration Form

September 26, 27 & 28 -- Salem Convention Center, Salem, OR

NEW starting this year! No Saturday Exhibit times, break down on Friday evening!

Exhibit Thursday, 4:00-6:30pm (set up time 12p-3pm)
(managers & physician supervisors invitation only vendor reception)

Exhibit Friday, 7am-5:30pm (door prizes drawing 5-5:30pm)

See attached Exhibit Time Schedule for move in and set up times.

REGISTRATION AND PAYMENT

Single (approx. 8' x 10') \$ 499

Double (approx. 16' x 10') \$ 899

Vehicle Space (with electrical outlet) \$ 699

We will provide packet materials \$ 99

Materials must be received by 9/1. Mail to address in box at right. Contact Teresa for quantity at teresa@oregonemsconference.com

Make checks payable to:

OTREF (Oregon Trauma Research & Education Foundation)

Reference Oregon EMS Conference 2019

Mail payment & registration to:

Teresa Sielsch

c/o Oregon EMS Conference

4633 NE 84th Avenue

Portland, OR 97220

Visa, Master Card or American Express by fax:
503-926-9297*

*Credit Card Statements will reflect OTREF as payee.

Sorry, no Purchase Orders Accepted

Advertise in Conference Brochure. (Mailed to 10,000+ individuals/agencies.) **Ad must be received by May 17th.** Ad sizes approximate.

\$500 half page - 7.5" w x 5" h

\$300 quarter page - 4" w x 5" h

\$200 business card - 3.3" w x 2" h

Advertise in CE Booklet. (Distributed to attendees, kept for 2 years.) **Ad must be received by August 16th.** Ad sizes approximate.

\$500 full page - 4.5" w x 6" h

\$300 half page - 4.5" w x 3" h

\$200 business card - 3.3" w x 2" h

Exhibitor Information: (Please review the attached "Exhibit A" - Responsibility Clause for Exhibitors)

Company	<input type="text"/>	Local Rep	<input type="text"/>	E-mail	<input type="text"/>
Street	<input type="text"/>	City	<input type="text"/>	State	<input type="text"/>
		Zip	<input type="text"/>		
Phone	<input type="text"/>	Cell	<input type="text"/>	Web Site	<input type="text"/>

Name(s) to appear on attendee badge(s).

1. E-mail

2. E-mail

Comments/Special Needs

Visa or MasterCard by fax; (503-926-9297), telephone; (503-781-9405) or email; teresa@oregonemsconference.com

Visa Master Card American Express Statement will reflect OTREF as payee.

Name Card # Exp Date

Address

Please invoice us. Email invoice to: Name E-mail