

Industry Support Opportunities

July 11-14, 2019

Oregon's Meeting at the Eugene Hilton Hotel



66 E 6th Ave, Eugene, OR 97401
(541) 342-2000

We personally wish to invite your organization to participate as a supporter of this event.

Oregon's Meeting is a unique opportunity to show your support and network with Oregon

*Optometric Physicians. **Pease join us!***

Event Co-Support Opportunities

Platinum Level Support; includes inside area double exhibit table, presentation time, two display ads in OOPA newsletter— two editions.

Gold Level Support; includes inside area exhibit table, two display ads in OOPA newsletter — two editions.

Silver Level Support; includes inside area exhibit table, one display ad in OOPA newsletters.

Bronze Level Support; includes inside area exhibit table

Supporter Level; includes hallway area exhibit table.
Five spaces available, first come first served, check availability.

Exhibit Table Details

One 8' professionally draped table, Two chairs

Two company reps are included; additional reps may attend for \$100 per person.

Exhibit Hall — Friday Night

5:00-6:00 PM Past Presidents Reception with exhibitors.

6:00-9:30 PM Exhibit Hall [*set up 3:00 PM, tear down 9:30 PM*]

Event Specific Sponsor Opportunities

Attendee Fri, Sat or Sun Breakfast – Event Sponsor; includes Exhibit Table, and presentation time.

Attendee Fri or Sat Lunch - Event Sponsor; includes Exhibit Table, and presentation time.

Past Presidents Reception - Event Sponsor; includes Exhibit Table [prior to Saturday banquet]

Presidents Reception - Event Sponsor; includes Exhibit Table [in suite after Friday exhibit hall]

Attendee Social Activity - Golf or Walking Tour

***Education Sponsorships Also Available**
Please contact OOPA for Details*

Door Prizes

Absolutely! Bring your own "fish bowl" and collect business cards from our members, you may offer a door prize at the end of the day from your display table.

Security

OOPA will provide reasonable security during the event, but cannot be responsible for exhibitors' possessions. It remains the exhibitor's responsibility to protect his/her equipment and materials. OOPA assumes no liability for loss.

OOPA can not be held liable for events beyond its control, such as acts of God, government regulations, disasters or weather-related hazards, civil unrest, acts of terrorism, or any other emergency, making it inadvisable or impossible to hold the conference. OOPA will make every effort to inform participants of any cancellation as soon as possible to enable participants to cancel hotel and flight arrangements.

Mail participation form to: OOPA, 4404 SE King Road, Milwaukie, OR 97222 or Fax 503-659-4189

?? Questions ?? 800-922-2045 or Lynne@oregonoptometry.org



Industry Support Reg. Form

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Don't miss this opportunity to show YOUR support for Optometry!

Company Name: _____

Address: _____

City/State/Zip: _____

Contact Name/Email: _____

Rep Name/Email: _____

Rep Name/Email: _____

Conference Co-Support Opportunities	Amount	Total
Platinum Level Support; includes inside area double exhibit table, presentation time, two display ads in OOPA newsletter— two editions.	\$5500	_____
Gold Level Support; includes inside area exhibit table, two display ads in OOPA newsletter — two editions.	\$4500	_____
Silver Level Support; includes inside area exhibit table, one display ad in OOPA newsletter.	\$2500	_____
Bronze Level Support; includes inside area exhibit table.	\$1675	_____
Supporter Level; includes hallway exhibit table. <i>Five available, first come first served, check availability.</i>	\$1000	_____

Event Support Opportunities	Amount	Total
Attendee Breakfast <input type="checkbox"/> Friday <input type="checkbox"/> Saturday <input type="checkbox"/> Sunday	\$4000	_____
Attendee Lunch <input type="checkbox"/> Friday <input type="checkbox"/> Saturday	\$4500	_____
Friday Afternoon Attendee Social Activity ___ Golf Event OR ___ Walking Tour F&B	\$2500	_____
Friday Night Exhibit Hall [<i>food and beverage for event</i>]	\$4500	_____
President's Reception [<i>after exhibit hall; in the hospitality suite</i>]	\$3000	_____
Past President's Reception [<i>prior to Saturday banquet</i>]	\$2500	_____
Additional Reps at Exhibit Table [per person] Name(s): _____	\$100	_____
Name(s): _____	Total Event Support	\$ _____

Exhibit space is limited, availability is on a first come / first served basis. Payment in full secures your space. Fee includes; 8' draped table, two chairs, and two representatives. ___ Electricity (check if needed). Event supporters will receive recognition during the event in verbal and signage acknowledgement, as well as their logo and company name on all event distributed materials. Please submit company logo in jpeg format for publicity purposes.

Payment Information

Check enclosed \$ _____ [Preferred method of Payment] Payable to Oregon Optometric Physicians Association [OOPA]

Credit Card: Acct#: _____ Exp. _____ CCV _____

Card holders name: _____ Signature: _____

Mail participation form to: OOPA, 4404 SE King Road, Milwaukie, OR 97222 or Fax 503-659-4189

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Phone: 503-654-5036 | Fax: 503-659-4189 | Web: www.oregonoptometry.org | E-mail: oopa@oregonoptometry.org

