



2017 OPGMA Congress Sponsorship Form

January 16-18, 2017 | Kalahari Resorts, Sandusky, Ohio

Please indicate your level of sponsorship below:

SPONSOR INFORMATION

Company

Contact Name

Address

City State/Province Zip/Postal Code

Email

Phone

Fax

Company Website

PAYMENT INFORMATION

\$ _____ Total Due

AmEx MasterCard VISA Discover

U.S. Check (Payable to OPGMA)

Credit Card Number

Expiration Date

Name as it appears on card (please print)

CVV-code

Credit Card Billing Address

Authorized Signature—I hereby agree to the terms and conditions of my card issuer agreement.

***Please send hi-res logo to opgma@assnoffices.com**

Fax: 614-221-1989

Platinum Level - \$1,000
____ Printed Program
____ Keynote Speaker Sponsor
____ Monday night reception

Gold Sponsor - \$750
____ Exhibitor Welcome Station

Silver Sponsor - \$500
Monday afternoon beverage break in exhibit hall- **Rockford Package Supply**
____ Tuesday morning beverage break in the exhibit hall
____ Tuesday afternoon beverage break in the exhibit hall
____ Wednesday morning beverage break in the exhibit hall
____ 4' x 4' full-color floor decal placed at tradeshow entrance/hallway

Bronze Sponsor - \$250
____ Sponsorship of an Educational Session

Advertisements in the Printed Program

____ vertical 3 1/2" X 9 3/4" (full page) \$190

____ vertical 3 1/2" X 4 3/4 (half page) \$150

COMPLIMENTARY REGISTRATION

Number of registrations based on sponsorship level

First Name

Last Name

First Name

Last Name

First Name

Last Name

First Name

Last Name