

**ODONA/LTC 21<sup>st</sup> ANNUAL CONVENTION**  
**February 28, March 1, & March 2**  
**Embassy Suites Dublin Hotel, Columbus, Ohio**

**REGISTRATION FORM: Please register me for the 21<sup>st</sup> Annual ODONA/LTC Convention, February 28, March 1, & March 2, 2010, as indicated below:**

***PLEASE USE A SEPARATE FORM FOR EACH PERSON. Reproduce this copy as needed.***

**Please Print Clearly**

**Name:** \_\_\_\_\_

**Home Address:** \_\_\_\_\_ **Home Phone (\_\_\_\_\_)** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip** \_\_\_\_\_ **County** \_\_\_\_\_

**Facility:** \_\_\_\_\_ **Position:** \_\_\_\_\_

**Facility Address:** \_\_\_\_\_ **Facility Phone (\_\_\_\_\_)** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Your License # and State:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

I will be attending the **Sunday** program and reception \* Yes\_\_\_\_ No\_\_\_\_

I will be attending the **Monday** evening banquet \* Yes\_\_\_\_ No\_\_\_\_

*\*Both of these are included with the 3 day convention fee, but we need a total count for each.*

**REGISTRATION FEE(s) for Sunday, February 28, Monday, March 1 & Tuesday, March 2, 2010:**

**Member** Convention **\$250** (includes 3 days, breaks, lunches, banquet, exhibit hall)

**Non-member** Convention **\$275** (includes 3 days, breaks, lunches, banquet, exhibit hall)

**New Member** Convention **\$275** (includes 3 days, breaks, lunches, banquet, exhibit hall, and ODONA Membership)  
Or Renewing Member

**Bring your ADON/Unit Mgr. for \$175 Registration Fee** (*complete separate registration form for each*)

One day **Member** Convention (includes meals) **\$175** \_\_\_ Sun. Feb. 28, \_\_\_ Mon. Mar. 1 or \_\_\_ Tues. Mar. 2

One day **Non-member** Convention (includes meals) **\$200** \_\_\_ Sun. Feb. 28, \_\_\_ Mon. Mar. 1 or \_\_\_ Tues. Mar. 2

One day **New member** Convention (includes meals) **\$200** \_\_\_ Sun. Feb. 28, \_\_\_ Mon. Mar. 1 or \_\_\_ Tues. Mar. 2  
Or Renewing Member

**Total enclosed: \$** \_\_\_\_\_ Make checks payable to: "ODONA/LTC"

**Payment must accompany this registration form**

Mail check with Registration Form(s) to:

**ODONA/LTC**  
**190 East Pacemont Road**  
**Columbus, OH 43202**

Contact Embassy Suites Dublin directly to arrange housing (614) 790-9000

For convention questions, please call or email: 866-226-3662 odonaltc@gmail.com