

**2010 ODONA CONVENTION
BOOTH REGISTRATION FORM**
Exhibition day: Monday, March 1, 2010
Embassy Suites Dublin Hotel, Columbus, OH

Company Name _____

Mailing Address _____

City _____ State _____ Zip _____

Convention Contact Person _____ Phone # (____) _____

Fax # (____) _____ Email _____

Phone # to be listed in the Vendor Directory distributed at convention, if different from above:
(____) _____ *We suggest listing your 800 # if you have one*

All booths are 6' tabletop booths. Will you need electricity? ____Yes ____No

If displaying **large equipment**, give brief description, eg. bed, lift, wheelchair _____

Odonal allows each exhibitor **two (2) representatives** to staff their booth. Every person over two (2) will incur an additional \$25.00 fee. Please list the names of your booth representatives.

Booth representatives: 1. _____ 2. _____

2010 21th Convention
"Reach for the Stars: Touch a Life. Make a Difference with ODONA"
Monday, March 1st Vendor Exhibit Day
Exhibit Hours: 11:30 am – 3:30 pm*

* Includes "Lunch with Attendees" and "Vendor Recognition & Booth Gift Drawing"
Vendor Hall will open at 9:30 AM for set-up; tear-down at 3:30 PM following Vendor Recognition & Booth Gift Drawing

Booth Registration Fee: \$500.00* (one booth) *Patron members: 10% discount on booth fee!
(includes 2 tickets for lunch w/attendees) **Early Bird:** Postmarked by January 15, 2010: \$400.

If you sponsor any part of the convention, the booth fee will be as follows:

SPONSOR \$500.00 - \$999.00	ONE BOOTH \$250.00
SPONSOR \$1000.00 - \$1999.00	ONE BOOTH \$150.00
SPONSOR \$2000.00 - \$2,999.00	ONE BOOTH \$ 75.00
SPONSOR \$3000.00 and above	ONE BOOTH FREE!

__Yes, we will be a sponsor and will complete and submit the attached sponsor form!

Registration must include full payment for booth(s)

Date: _____ Enclosed is my check, payable to ODONA/LTC, for \$ _____ for _____ booth(s)

Mail registration & check to: **ODONA/LTC**
Elaine Lehman, Executive Assistant
190 East Pacemont Road
Columbus, Ohio 43202

Questions? Contact Elaine Lehman: odonaltc@gmail.com or (866)226-3662