



Exhibitor Registration Form: for check payment

(A \$25.00 processing fee is applicable when paying by check.)

Business Name: _____ Phone: _____

Street Address: _____ State: _____ Zip: _____

Primary Contact: _____ Email: _____

Do you need Representative name badges? *[if you need badges, type names below]*

Registration Costs and Sponsorship Opportunities:

Conference Amenities	Cost	Quantity	Sub-Total
Exhibitor Booth (includes WiFi & Electricity) *	\$775. each		
* Save \$25 per booth (pay online w/credit card via AONP Activities page: www.npofoklahoma.com)			
Marketing Opportunities <i>(limited quantities available)</i>	Cost	Quantity	Sub-Total
Thursday lunch sponsor	\$5,000.00		
Wed, Thurs, or Friday break <i>(logo & info on food table)</i>	\$500.00		
Photo Booth <i>(company logo on each photo)</i>	\$500.00		
Lanyards & attendee name badge <i>(company logo on badges)</i>	\$1,000.00		
Charging Station <i>(company logo on charging station)</i>	\$500.00		
Door Wraps	\$1,150.00		
Hotel Key Cards	\$1,700.00		
USB Flash Drives	\$2,000.00		
Convention Bags <i>(3,000. if we purchase or you can provide)</i>	\$3,000.00		
Total Registration Cost			

List Exhibitors you DO NOT wish to be near (if any): _____

Products being displayed: _____

An invoice will be sent to your email. Print invoice and mail with your check (payable to AONP) to:

Association of Oklahoma Nurse Practitioners
 ATTN: Benny Vanatta, Executive Director
 1611 N. Broadway Avenue
 Oklahoma City, OK 73103

Federal Tax ID #73-1458735