



## **Exhibitor Registration Information**

Please note that the first two (2) persons from an exhibiting Company must pay the full registration fee. Each additional (third and up) representative of the exhibiting company is required to pay only the "guest registration/meal pass" fee.

Six-foot skirted tables and chairs will be available for your exhibit. We will not be using pipe and drape. Table-top or free-standing exhibits are acceptable are acceptable. The area available for exhibit set-up is approximately 8 feet wide by 4 to 6 feet deep.

Exhibit Set-Up: Monday, June 3 from 12:00 p.m.-5:00 p.m.

**Exhibit Hours:** Monday, June 3 from 5:30 p.m. to 7:00 p.m. (optional during the welcome reception through dinner) and Tuesday, June 4 from 8:00 a.m. to 5:00 p.m.

**Shipping Instructions:** It is the responsibility of the exhibitor to pack, contact and schedule delivery to the resort. Packages should not be scheduled to arrive more than two days prior to the scheduled event.

Ship to: Your Name, Company Name + "Hold for Arrival Date of June 5/OTA Annual Conference" Salishan Coastal Lodge 7760 North Highway 101 Gleneden Beach, Oregon 97388

**Exhibit Breakdown:** Representatives are welcome to breakdown their displays after 4:00 p.m. on Tuesday, June 4, however, please note **all** exhibits must be dismantled and removed from the exhibit area no later than 5:15 p.m.

## Payment Information & Miscellaneous

| I would like to <b>pay by check</b> once I receive an invoice via email.  |    |
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| ONE PAYMENT OPTION REQUIRED  I would like to pay by credit card once I am emailed an invoice with a direct link to pay.  Please note that card payments will include an additional 3% processing fee. |    |
| Best email email address to send your invoice to:   |    |
| I would like additional information on the Golf Tournament when it becomes available.   |    |
| I have special requirements (dietary restrictions, handi-cap access, etc. Please follow up with me.   |    |
| I have other questions or comments:   |    |
| I have additional attendees to register on this form: Name & Email of Attendee(s):  |    |
| <u>5.</u>   | 7. |
| 6.  | 8. |