

APPLICATION AND CONTRACT FOR PRODUCT THEATER

OMED25

Meeting Dates: September 25-28, 2025
 Exhibit Dates: September 26-27, 2025
 Music City Center | Nashville, TN



Contact Information

Company Name.....
 Contact..... Title.....
 Tel (direct)..... Mobile (required).....
 Email (direct)..... Web Site.....
 Address.....
 City..... State..... Zip..... Country.....

Product Theater

Exhibitor

- Friday: \$30,000** (September 26, 10:30 – 11:15 AM)
- Friday: \$36,500** (September 26, 12:30 – 1:15 PM)
- Saturday: \$30,000** (September 27, 10:30 – 11:15 AM)
- Saturday: \$36,500** (September 27, 12:30 – 1:15 PM)

Non-Exhibitor

- Friday: \$34,000** (September 26, 10:30 – 11:15 AM)
- Friday: \$40,500** (September 26, 12:30 – 1:15 PM)
- Saturday: \$34,000** (September 27, 10:30 – 11:15 AM)
- Saturday: \$40,500** (September 27, 12:30 – 1:15 PM)

Included: Product Theater will be On Demand for 2 months post show and includes one (1) promotional email

Qty. _____ **Total Cost: \$** _____

Payment Information

Cancellation Penalties

Deposit and Payment Schedule
December 20, 2024...50% due for applications submitted prior to December 20, 2024
December 20, 2024 – May 28, 2025...50% due with application
After May 28, 2025...100% due
AOA requires payment in full no later than May 29, 2025. Failure to make payments does not release the contracted or financial obligation of Company.

Cancellation Penalties
Through December 19, 2024...0%
December 20, 2024 – May 28, 2025...50%
After May 28, 2025...100%

Payment Remittance: An invoice with instructions on submitting an online credit card, E-Check or ACH/Wire will be sent via email.

Submit application to: omedexhibits@spargoinc.com
 703-631-6200 | 800-564-4220

I acknowledge that, as an authorized representative of the above stated Company, I have received, reviewed, and agree that Company will comply with the *Osteopathic Medical Conference & Exposition Rules and Regulations*. Company agrees to receive all written and electronic correspondence from AOA, SPARGO, Inc. and official event contractors in reference to OMED25 and all future AOA events.

This Product Theater application will become a contract upon Company's authorized signature and AOA's acceptance and approval.

Company Signature..... Date.....
 Printed Name..... Telephone.....