

APPLICATION AND CONTRACT FOR EXHIBIT SPACE

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 only)..... Mobile (required).....

Email (direct only)..... Web Site

Address.....

City..... State..... Zip..... Country.....

Exhibit Space

- ☐ Standard Space – \$40.00 per sq. ft. ☐ Premium Space – \$43.00 per sq. ft. ☐ Corner – \$250 per open corner
- ☐ Non-Profit / AOA Affiliate Space – \$25.00 per sq. ft. *(rate applies to designated non-profit area and does not apply to COMs)*
- Booth Size: _____ (min. 10' x 10') Booth # Preferences: 1st _____ 2nd _____ 3rd _____
- ☐ Featured Exhibitor Listing (Early Bird) - \$450
(Application must be submitted by September 21, 2024, to be eligible for the early bird rate.)
- ☐ Featured Exhibitor Listing (Standard) - \$650
- Booth Cost: _____ Total Cost of All Items: _____
- ☐ We are interested in Product Theaters ☐ We are interested in Sponsorship Opportunities

Payment Information

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 with application
AOA requires payment in full no later than May 29, 2025. Failure to make payments does not release the contracted or financial obligation of Exhibitor.

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

Cancellation Penalties

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.

I acknowledge that, as an authorized representative of the above stated Exhibitor, I have received, reviewed, and agree that Exhibitor will comply with the *Osteopathic Medical Conference & Exposition Rules and Regulations*. Exhibitor 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 exhibit space application will become a contract upon Exhibitor's authorized signature and AOA's acceptance and approval.

Exhibitor Signature..... Date.....

Printed Name..... Telephone.....