



**Sponsorship Opportunities**  
**Ohio Orthopaedic Society, 84<sup>th</sup> Annual Meeting**  
**May 2-3, 2024**

**Benefits of Exhibiting**

Exhibitors at the Ohio Orthopaedic Society Annual Meeting will provide you with access to a captive audience consisting of over 125 orthopaedic surgeons, residents and fellows from across Ohio. With multiple levels available to showcase your company's products and services, the Ohio Orthopaedic Society strives to ensure your support offers you ample facetime with our attendees.

**Sponsorship Levels**

**Platinum- \$5,000**

- Sponsor of the Resident Papers Competition.
- Exhibitors will be invited and recognized at the Ohio Orthopaedic Society Executive Committee Dinner on Thursday evening.
- Priority location in the exhibit hall.

**Gold- \$3,000**

- Sponsor of the Annual Meeting Lunch.
- Recognition during the lunch break.
- Priority location in the exhibit hall.

**Silver- \$2,000**

- Sponsor of breakfast or one of the two meeting breaks.
- Priority location in the exhibit hall.

**Bronze- \$1,000**

- Acknowledgment and support on signage at the meeting.

**All Levels Include:**

- Pre-Meeting Attendee List- Confirmed exhibitors will receive an attendee list as it becomes available prior to the meeting.
- Admission to Scientific Sessions- Ohio Orthopaedic Society welcomes registered booth representatives to attend all scientific sessions.
- Print Recognition- Your company will be listed as a supporter of the Ohio Orthopaedic Society Meeting in printed materials that are made available to all attendees.
- Breakfast and Breaks- A continental breakfast before the meeting on Friday and two 30 minute breaks throughout the day. Food and beverages are arranged in the exhibit hall to maximize networking opportunities.
- Lunch with Meeting Attendees- All sponsors are invited to join meeting attendees for lunch.
- Set-Up- Each exhibitor will receive 1 draped, 6 foot table with 2 chairs in the exhibit hall.

All Exhibitors are invited to play in a golf scramble Thursday, May 2<sup>nd</sup> with meeting attendees at New Albany County Club for \$200 per person.

**REGISTER NOW**

## **Additional Details**

### **Set-Up:**

Thursday, May 2, 2024  
2:00PM-3:30PM

### **Exhibiton Hours:**

Friday, May 3, 2024  
7:30AM-4:00PM

### **Meeting Location:**

Quest Conference Center  
9200 Worthington Road  
Westerville, Ohio 43082

### **Lodging Information:**

Hampton Inn and Suites  
8411 Pulsar Place  
Westerville, OH 43082  
(614) 885-8400  
0.1 miles away from the Quest Conference Center

Fairfield Inn and Suites  
9000 Worthington Road  
Columbus, OH 43082  
(614) 568-0770  
0.2 miles away from the Quest Conference Center

Hilton Columbus/Polaris  
8700 Lyra Drive  
Columbus, OH 43240  
(614) 855-1600  
0.5 miles away from the Quest Conference Center

### **Terms and Conditions**

Payment is due within 7 days prior to the event. The Ohio Orthopaedic Society reserves the right to make all space assignments and all decisions concerning signage and exhibitor recognition. We will make every effort to accommodate all reasonable requests.

### **Cancellation Policy**

Due to the nature of the event, we are unable to issue refunds within 30 days of the event date.

### **Questions?**

Contact Steve Landerman, Executive Director  
(614) 537-3319 or [Steve@OhioOrthoSociety.org](mailto:Steve@OhioOrthoSociety.org)

Rachel Landerman  
(614) 439-0434 or [Rachel@OhioOrthoSociety.org](mailto:Rachel@OhioOrthoSociety.org)

**Exhibitor Registration: Ohio Orthopaedic Society Annual Meeting  
May 2-3, 2024**

**Exhibitor Information:**

<b>Company Name:</b>					
<b>Address:</b>					
<b>City</b>		<b>State:</b>		<b>Zip Code:</b>	
<b>Primary Contact Name:</b>			<b>Primary Contact Phone:</b>		
<b>Primary Contact Email:</b>					
<b>Representative Attending Name:</b>					
<b>Representative Attending Email:</b>		<b>Representative Attending Phone:</b>			
<b>Representative Attending Name:</b>					
<b>Representative Attending Email:</b>		<b>Representative Attending Phone:</b>			

**Sponsorship Opportunities:**

<b>Sponsorship Levels</b>	<b>Cost</b>	<b>Quantity</b>	<b>Total</b>
Platinum	\$5,000		
Gold	\$3,000		
Silver	\$2,000		
Bronze	\$1,000		
Thursday Golf Scramble	\$200		
		<b>Total Cost:</b>	

**Payment Information:**

Credit Card:

<b>Check One:</b>	AMEX		VISA		MasterCard		Discover	
<b>Cardholder Name:</b>								
<b>Card Number:</b>					<b>Expiration Date:</b>			
<b>Billing Address:</b>								
<b>Billing City:</b>		<b>Billing State:</b>		<b>Billing Zip Code:</b>				

Check:

Check Payable To: Ohio Orthopaedic Society  
Mail To: 66 E. Lynn Street, Columbus, OH, 43215

<b>Signature:</b>		<b>Date:</b>	
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Please email completed form to: [Rachel@OhioOrthoSociety.org](mailto:Rachel@OhioOrthoSociety.org)