Ohio Society of Oral and Maxillofacial Surgeons

# OHIO SOCIETY OF ORAL AND MAXILLOFACIAL SURGEONS
# 2027 ANNUAL SCIENTIFIC CONFERENCE

## April 10, 2027
## 8:00 am – 4:30 pm

## Renaissance - Westerville

**Conference Chair: Petra Olivieri, DMD, MD**

**OMS SESSION PRESENTERS:**

Jimmie L. Harper, Jr., DDS, MS

Deepak G. Krishnan, DDS, FACS, FDSRCPS

James A. Phero, DDS, MD

**OMS STAFF SESSION PRESENTER:**

Donald P. Lewis, Jr., DDS, CFE

*Estimated attendance 100 OMS; 40 staff; 20 residents and dental students*

## EXHIBIT and SPONSORSHIP OPPORTUNITIES

**On-Site Exhibitor: $700**
Each exhibitor receives acknowledgement on OSOMS website, plus optional inclusion of promotional material in attendee packet. Exhibitors will be placed near the refreshment/break area in order of registration receipt. Exhibitors receive one 6' draped tabletop area. Additional tables available, space permitting, for an additional fee. Wireless Internet will be available. Electric available upon request. Refreshment breaks & lunch included. Limit of 3 attendees per exhibit. No solicitation within classroom.

**Packet Insert Only: $300**
Can't be at the conference? Submit your promotional materials for inclusion in our attendee packets.

**Social Event Sponsors*:***

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|---|---|---|
| Refreshment Breaks | (2 available) | $ 250 |
| Continental Breakfast | (1 available) | $ 350 |
| Luncheon | (1 available) | $ 500 |

Sponsors receive acknowledgement at the conference and on OSOMS website, and optional inclusion of promotional materials in attendee packets. Sponsor options do not include exhibit space.

## IMPORTANT DETAILS AND DATES:

**Exhibit spaces and sponsorship opportunities will be filled in the order they are received. Space is limited.**

**Payment must be received no later than 15 days after registration or exhibit space may be released.**
Check payable to OSOMS. Payment and registration may also be made at www.oh-oms.org.
No refunds on exhibit registrations cancelled after March 12, 2027.

**HOTEL INFORMATION:**

- **Renaissance Columbus Westerville-Polaris Hotel for 179.00 USD per night - Last Day to Book : Friday, March 19, 2027**

**Book your group rate for Ohio Oral Surgeons Annual Meeting**

**ON-SITE EXHIBITORS:**
All exhibitors will receive:

- one six-foot exhibit table with skirting and two chairs
- access to electrical power, if requested
- wireless internet access
- complete listing of attendees one week prior to event and post
- refreshment breaks
- lunch

If extra tables, space, wired internet, or phone line is needed please contact OSOMS to arrange. Exhibitors may contact the venue directly for shipment of any items. OSOMS will not be held responsible for costs or receipt of shipped materials, storage of materials or loss. Exhibitors are welcome for any portion of the following time:

**Set-up time:** Pending hotel booking – vendors may be able to set-up Friday evening. Vendors will be notified as to availability prior to the meeting. All exhibit spaces are assigned.

**Exhibits open:** 8:00 am – 4:30 pm Saturday

**Exhibits will need to be removed by 5:00 pm Saturday**

**TO HAVE MATERIALS INCLUDED IN THE ATTENDEE HANDOUT PACKETS:**
Copies of promotional materials to be included in attendees' handout packets must be received no later than **April 1** (150 copies). Extra copies will not be returned unless prior arrangements are made. Limit of two inserts (unless placed in a packet). We will insert small promotional items such as pens. Materials cannot exceed 9" by 12".

**MAIL INSERTS TO: (do not request signature)**
Ohio Society of Oral and Maxillofacial Surgeons
c/o Kathy Sarver
7772 Windwood Dr
Dublin, OH 43017

**QUESTIONS / CONTACT:**
**Tracy Schiefferle, Executive Director**
614-400-6707 614-336-2604 (fax) tracy@oh-oms.org www.oh-oms.org

# 2027 Ohio Society of Oral and Maxillofacial Surgeons Annual Conference
# EXHIBIT/SPONSOR REGISTRATION FORM

Please provide us with the name of your company and contact information exactly as you would like it to appear in promotional materials:

**Company Name:** _____

**Company Contact:** _____ Phone: _____

E-mail:_____ Web: _____

**Representative(s) attending:**

_____ **Email:** _____

_____ **Email:** _____

_____ **Email:** _____

**Type of product to be exhibited:** _____

**Social Event Sponsors: (exhibit not included)**

___ Refreshment breaks $ 250
___ Continental breakfast $ 350
___ Luncheon $ 500

**Exhibitors:**

___ On-Site Exhibitor: $700 (insert included)

___ Attendee Packet Insert ONLY: $250

**We will be sending material for attendee handout packets: ____Yes ____No**
***Materials must be received before April 1 Quantity: 150***

Please pay online or mail check made payable to OSOMS. Registration is not complete until payment has been received and exhibitor will not be listed on website or promotional materials until paid. **If payment not received within 15 days of registration, vendor exhibit space may be cancelled.**

**Ohio Society of Oral and Maxillofacial Surgeons:**
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