



2016 EXHIBITOR APPLICATION

EXHIBITOR NAME (please print or type)

CONTACT NAME

TITLE

EMAIL ADDRESS

ADDRESS

CITY STATE ZIP BUSINESS TELEPHONE ()

() BUSINESS FAX EMAIL ADDRESS

ARE YOU SPEAKING AT ANY WORKSHOPS? YES NO

APPLICATION FEE: \$280.00 per day. (SPEAKERS WILL BE FREE OF CHARGE)
(Registration fee includes two people entry to the workshop & lunch.)

CHECK OR MONEY ORDER NUMBER

Visa MasterCard Discover AMEX _____
CARD NUMBER

Expiration Date: ____ / ____ / ____ CCV CODE: _____ Zip Code (security purposes) _____

NAME ON CARD

CARD HOLDER SIGNATURE

I am requesting exhibit space for the following: (check all that apply)

* Please note that dates may be subject to change.

- | | | | |
|--|----------------------|----------------------|------------------|
| <input type="checkbox"/> Wastewater Workshop | [] April 5, 2016 | [] April 6, 2016 | \$280.00 per day |
| | <u>Deer Creek</u> | <u>Bellville</u> | |
| <input type="checkbox"/> Pretreatment Workshop | [] May 10, 2016 | [] May 17, 2016 | \$280.00 per day |
| | <u>Deer Creek</u> | <u>Bellville</u> | |
| <input type="checkbox"/> Wastewater Lab Workshop | [] May 11, 2016 | [] May 18, 2016 | \$280.00 per day |
| | <u>Deer Creek</u> | <u>Bellville</u> | |
| <input type="checkbox"/> Water Lab Workshop | [] May 11, 2016 | [] May 18, 2016 | \$280.00 per day |
| | <u>Deer Creek</u> | <u>Bellville</u> | |
| <input type="checkbox"/> Class III & IV Workshop | [] August 2, 2016 | [] August 3, 2016 | \$280.00 per day |
| <input type="checkbox"/> Compliance Workshop | [] October 18, 2016 | [] October 19, 2016 | \$280.00 per day |
| <input type="checkbox"/> Water Distribution Workshop | [] December 6, 2016 | [] December 7, 2016 | \$280.00 per day |
| <input type="checkbox"/> Procrastinator's Workshop | [] December 8, 2016 | [] December 9, 2016 | \$280.00 per day |

TOTAL FEE \$ _____

RETURN COMPLETED FORM TO:

OPERATOR TRAINING COMMITTEE OF OHIO, INC.

3972 Indianola Avenue * Columbus, OH 43214 * (614) 268-6826 *(614) 268-3244 Fax

www.otco.org