



AAHAM/COPAM will be hosting a combined conference at Sawmill Creek Resort in Huron, Ohio. We have planned an outstanding educational conference, a relaxing stress relief environment and a fun filled evening of entertainment. The dates for the conference this year are September 16th through 17th. Vendors may set-up after 6:00pm Wednesday the 15th. Please see the attached conference flyer for the specific conference information.

We are holding a vendor fair this year at the conference for the benefit of both the vendors and conference attendees. We have made a small change because space is limited and we anticipate a large demand, we are inviting both AAHAM and COPAM Corporate Partners first and only after our partners have had the opportunity to register will we open it up to non partnering companies.

AAHAM or COPAM Corporate Partner Fee : \$500 registration fee includes:

- Paid registration for two participants.
- Eight-foot table in vendor fair.
- Recognition from all participants.
- All breaks and breakfasts are served in the vendor fair room.

Non - AAHAM or COPAM Corporate Partner Fee : \$750 registration fee includes:

- Paid registration for two participants.
- Eight-foot table in vendor fair.
- Recognition from all participants.
- All breaks and breakfasts are served in the vendor fair room.

This year, we are again asking our partners to co-sponsor the conference activities. Minimum co-sponsorship amount is \$250. Your company will be recognized for your contribution at the activity. We would like to encourage you to consider these sponsorship opportunities:

- | | |
|------------------|----------------------|
| DJ entertainment | Picnic on the Patio |
| Breakfast | Corn Hole Contest |
| Breaks | Cash bar |
| Lunches | Educational speakers |

Vendor space is limited this year so send in your completed registration information below and attach a copy of this form with a check payable to COPAM.
(Reservation will not be made until the check has been received.)

If you have any questions concerning this opportunity, please contact Casey Williams at caseywilliams@alink.com or 740.763.7008

Thank you in advance for your support!

AAHAM / COPAM Corporate Partner: Registration Fee: \$500	\$ _____
NON - AAHAM / COPAM Corporate Partner: Registration Fee: \$750	\$ _____
Activity Sponsorship Fee: \$250 per activity	\$ _____
Please select which activity you would like to sponsor	Total \$ _____
<input type="checkbox"/> DJ entertainment	<input type="checkbox"/> Picnic on the Patio
<input type="checkbox"/> Breakfast	<input type="checkbox"/> Educational speakers
<input type="checkbox"/> Breaks	<input type="checkbox"/> Cash bar
<input type="checkbox"/> Lunches	

Sponsoring Company Name: _____

Attendees Names: 1. _____ 2. _____

Address: _____ City: _____ State: _____ Zip Code: _____

E-mail address: _____ Telephone: _____

Electric hook-up needed at booth? Yes No

Please make checks payable to COPAM and remit payment to:

Fawn Thompson
 Manager, Patient Accounts
 OSU Health System
 PO Box 183102, 660 Ackerman Road
 Columbus, OH 43218
 (614) 293-0475
 fawn.thompson@osumc.edu

Deadline August 1st 2010