



Hello Exhibitors,

The Oklahoma Society of Clinical Oncology would like to invite you to attend the 2017 OSCO/NEOONS Nurse Meeting.

Date: Saturday, August 26, 2017

Place: Oklahoma Cancer Specialists and Research Institute
12697 East 51st South Tulsa, OK 74146

Time: 8:00 AM - 1:45 PM

Agenda: Posted to website.

Exhibit setup: The meeting space will be unlocked at 7:00 a.m. the morning of the meeting. Breakdown is at your discretion but needs to be complete before 2:00 PM. ****If you would like a tablecloth for your table please provide your own. Tablecloths not provided.**

Registration: Please complete the registration form on page 2 of this invitation and email it to Kristen@mjexecmgmt.com

Display Fees: Display fees are based on your level of corporate membership. Attendance-only fees are the same as “extra rep” fees below. Display fees include: registration fee, breakfast, display table, two chairs and trashcan.

Our industry friends are of course welcome to join us for breakfast. OSCO Tax ID #73-1392619.

*Diamond Members	FREE (5 reps included)	*Silver Members	\$600 (2 reps included)
Extra diamond reps	\$150 each	Extra silver reps	\$250 each
*Platinum Members	\$200 (4 reps included)	*Bronze Members	\$800 (1 rep included)
Extra platinum reps	\$200 each	Extra bronze reps	\$275 each
*Gold Members	\$400 (3 reps included)	*Non-Members	\$1000 (1 rep included)
Extra gold reps	\$225 each	Extra reps	\$300 each

Mail payments to:

OSCO
c/o Corporate Accounts
14601 East 88th Place North, Suite 306
Owasso, OK 74055
Phone: (918) 274-8374
Kristen@mjexecmgmt.com

Warm regards,



Kristen Ray
Meeting Planner

OSCO/NEOONS Meeting – August 26, 2017 Tulsa, Oklahoma

Please make sure EACH representative is registered. Drop-ins will be invoiced.

Each exhibitor must be registered in order to attend the meeting. Please complete this registration form and fax to Kristen at (918) 274-8354 or scan it and email it to Kristen@mjexecmgmt.com

Name of your organization: _____

DISPLAY ___ ATTEND ONLY ___

#1. Exhibitor Name: _____ Title: _____

Phone # _____ Email address: _____

#2. Exhibitor Name: _____ Title: _____

Phone # _____ Email address: _____

#3. Exhibitor Name: _____ Title: _____

Phone # _____ Email address: _____

#4. Exhibitor Name: _____ Title: _____

Phone # _____ Email address: _____

#5. Exhibitor Name: _____ Title: _____

Phone # _____ Email address: _____