EXHIBIT AND GRANT LETTER OF INTENT

Vermont Optometric Association Fall Conference - September 8-10, 2017

at the Essex Resort and Spa, Essex, Vermont

COMPANY NAME: _____

NAME OF AGENT/REP: _____

NAME(s) OF OTHERS ATTENDING: _____

EMAIL: _____

PLEASE COMPLETE THIS FORM and RETURN TO ADDRESS BELOW by July 14, 2017

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GRANT OPPORTUNITIES

Platinum Level Unrestricted Educational Grant	**$2,000 +**	**$**_____
Gold Level Unrestricted Educational Grant	**$1,500 -$1,999**	**$**_____
Silver Level Unrestricted Education Grant	**$1,000 - $1,499**	**$** _____
Other Contribution		**$** _____
Event Sponsorship:		
Cocktail Reception (Friday)	**$1,500.00**	**$**_____
Breakfast (Friday or Saturday)	**$1000.00**	**$**_____

*GRANTS will include 1 table for the exhibit hall.

*Keep in mind Pharmaceutical Companies may not sponsor the cocktail reception or breakfast

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EXHIBIT HALL - September 8 and 9, 2017

Before July 14th- **$475** _____ (Includes 1 table and lunch on **Saturday** for 1 person)

After July 14th - **$600** _____

Additional Saturday Lunch _____@ $25 each

If you would like to attend the VOA Dinner on Friday night, cost is **$65.00**/person. Check to attend _____

Check if you will need: Internet: □ YES □ NO / Electricity: □ YES □ NO

TOTAL ENCLOSED: $_____

Make checks payable to: Vermont Optometric Association

*Registration will close 1 week before the event (September 1st) to allow coordination of set up with the resort.

Please mail payment with this form to:

Vermont Optometric Association
c/o Rebecca Hogan, OD
250 Gonyeau Rd.
Plainfield, VT 05667