- Please print or type the names of the individuals who will be attending the Annual Meeting on the registration form. First names (or nicknames) will appear on your badges.
- 2. If we receive your registration by January 10, 2023, your company listing will appear in the Advance Program Book. A copy of the Program Book will be emailed to you.
- Be sure to send the following to OPEESA:
 Completed Registration Form
 Credit Card Authorization Form
 Completed Golf Tournament Form (if applicable)
 Check for total amount due or complete credit card information below.
 (We would prefer a check as that reduces expenses for OPEESA.)
- 4. Hotel arrangements must be made through Travel Plus. Contact Jackie Rummage at 877.644.5888 or email jackie@travelplusofnc.com. Your hotel arrangements will not be confirmed until Travel Plus receives your hotel form. It must be faxed to 800.652.7330 or emailed. Airline flights can be booked through Travel Plus, but it is not necessary.
- 5. Badges and Program Books will distributed at the OPEESA registration desk.
- 6. If you cannot attend the meeting, you must cancel your hotel arrangements with Travel Plus at 877.644.5888. The hotel cancellation policy is <u>7 days</u> before check in date or one night's room and tax will be forfeited. Do NOT contact The Sonesta Hotel to make changes or cancel your hotel room, it must be done through Travel Plus. OPEESA and Travel Plus are not responsible for any personal hotel charges related to late cancellations.
- 7. Registration fees will be refunded ONLY when cancellation is made, in writing, to OPEESA by January 27, 2023. Cancellations received prior to January 27, 2023, will be charged \$50 for administration handling. Golf and various tour fees cannot be refunded due to course and tour policies.

Fax or mail this sheet to OPEESA 865.518.6197

Meeting changes or cancellations must be sent in writing to OPEESA. Fax to 865.518.6197

Hotel changes and cancellations must be made through Travel Plus 877.644.5888

To reduce costly credit card fees, if possible, we would appreciate a check for your registration costs.

Please bill my	VISA or	MASTERCARD	or	AMERICAN EXPR	ESS	
Name on Credit Card:						
Credit Card Number:						
Credit Card CID# (special 3 or 4 digit code from back of card)						
Signature:						
Exp Date:						
Billing Address (for credit card):						
City:				State	Zip	



TOTAL AMOUNT DUE \$_____

Mail to: OPEESA, 10421 Hickory Path Way, Ste 103, Knoxville TN 37922. Phone: 865.264.8580 FAX: 865.518.6197 office@opeesa.com