

course and tour policies.

		Fax or mail this sheet to OPEESA
1.	Please print or type the names of the individuals who will be attending the Annual Me	eting 865.518.6197
	on the registration form. First names (or nicknames) will appear on your badges.	Meeting changes
2.	If we receive your registration by January 8, 2025, your company listing will appear in t	he or cancellations
	Advance Program Book. A copy of the Program Book will be emailed to you.	must be sent in
3.	Be sure to send the following to OPEESA:	writing to
	Completed Registration Form	OPEESA.
	Credit Card Authorization Form	Fax to
	Completed Golf Tournament Form (if applicable)	865.518.6197
	Check for total amount due or complete credit card information below.	Hotel changes
	(We would prefer a check as that reduces expenses for OPEESA.)	
4.	Hotel arrangements must be made through Travel Plus of NC. Contact Jackie Rummag at 877.644.5888 or email jackie@travelplusofnc.com. Your hotel arrangements will not confirmed until Travel Plus receives your hotel form. It must be faxed to 800.652.7330 emailed.	be must be made
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 Trave Plus at 877.644.5888. The hotel cancellation policy is 7 <u>days</u> before check in date or one night's room and tax will be forfeited. Do NOT contact The Vinoy Resort to make changes or cancel your hotel room, it must be done through Travel Plus of NC. OPEESA and Travel Plus of NC are not responsible for any personal hotel charges related to late cancellations.	21
7.	Registration fees will be refunded ONLY when cancellation is made, in writing, to	
	OPEESA by January 20, 2025. Cancellations will be charged \$50 administrative fee. No refunds after January 20, 2025. Golf and various tour fees cannot be refunded due to	

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

TOTAL AMOUNT DUE \$	
Please bill my VISA or MASTERCARD or	AMERICAN EXPRESS
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
	SA, 10421 Hickory Path Way, Ste 103, Knoxville TN 37922. 64.8580 FAX: 865.518.6197 office@opeesa.com