

TAO 5th Annual Meeting

Saturday, November 1, 2025 | Plaza San Antonio Hotel



Registration Form

(Please complete this form or reserve your exhibit space online at www.taohns.org)

Exhibiting Company: _____

Contact Person: _____

Email Address: _____

Address: _____

City/State/Zip: _____ **Phone:** _____

Description of Product/Service: _____

List of firms you do NOT wish to be in close proximity to: _____

Exhibit Levels *(see grid for more information)*

- Standard Exhibitor \$2,500
- Silver Exhibitor \$5,000
- Gold Exhibitor \$7,000
- Platinum Exhibitor \$10,000

Additional Sponsorships

- Refreshment Break \$1,500
- Lanyards \$1,500
- Continental Breakfast \$2,500
- Welcome Reception \$3,500
- Resident Bowl \$5,000
- Product Theater #1 \$15,000
- Product Theater #2 \$20,000

Payment Options

- Check - Payable to the Texas Association of Otolaryngology
(TAO TAX ID: 74-2138262)

To pay by check, Mail this form with your payment to:

TAO

ATTN: Sylvia Hall

15511 Hwy 71 West, PMB 256, Austin, TX 78738

- Credit Card** - Mastercard, Visa or American Express

To pay by credit card, contact Sylvia Hall at exhibits@cameroams.com or register online at

www.taohns.org

No refunds will be made after October 1, 2025

Signature: _____ **Date:** _____