



2026 ANNUAL MEETING

November 7, 2026

INVITATION TO EXHIBIT

APPLICATION FOR EXHIBIT SPACE

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

Exhibiting Company _____

Contact Person _____

Email Address _____

Address _____

City, State, Zip _____ Telephone Number _____

Description of product or service _____

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

EXHIBIT LEVEL

(SEE GRID FOR MORE INFORMATION)

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

ADDITIONAL ITEMS

(SEE GRID FOR MORE INFORMATION)

- Refreshment Break(s) \$1,500
- Hotel Key Cards \$1,500
- Continental Breakfast \$2,500
- Resident Bowl \$5,000
- Welcome Reception \$3,500
- Lanyards \$1,500
- 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 2, 2026

SIGNATURE _____ DATE _____