Exhibit Application
Ozark Food Processors Association
2650 North Young Avenue
Fayetteville, Arkansas 72704
Phone: 479-575-4607, Fax: 479-575-2165
Email: ofpa@uark.edu, Website: http://ofpa.uark.edu/

To exhibit at the OFPA Annual Convention, complete application and fax or mail to the address above. You can also complete the Exhibit Application on our website. Exhibit fee includes convention registration for two exhibitors per booth purchased (meals are available at the convention rate). Also included are booth space and name badges for up to six people working in the booth. An invoice will be sent to the billing contact. Payment can also be made by credit card from our website.

Sales Contact: __________________________ Company: ____________________________________________

Street Address: __________________________ City: __________________ State: ______ Zip: ______
Phone: __________________ Fax: __________________
E-mail: __________________ Website: __________________

Description of products and/or services:
________________________________________________________________________________________
________________________________________________________________________________________

Select membership category: (After March 15, a $50/booth additional fee will be charged).

___ Member Company ($150 per booth*)

___ Non - Member Company ($350 per booth*)

Number of booths needed: ______________

List person(s) who will be working the exhibit booth(s):
________________________________________________________________________________________
________________________________________________________________________________________

Will your exhibit need electricity? _____ Yes _____ No
Contact the RoAnna McDaniel at the Holiday Inn (email: roannamcdaniel@jqh.com, phone: 479-872-5919; fax: 479-872-8300) to arrange and pay for electricity

Billing Contact: __________________________

Street Address: __________________________________________________________
City: __________________ State: _________ Zip: __________
Phone: __________________ Fax: __________________ E-mail: __________________

Select method of payment:

___ Online credit card payment from the OFPA website

___ Please send invoice for exhibit fees

___ Exhibit fee enclosed