



24th Annual Seminar

Wednesday, October 1, 2025

8:00 am to 4:30 pm

Holiday Inn Wilsonville

25425 SW 95th Ave.

Wilsonville, OR 97070

Lunch and refreshments provided

Vendor Attendee: _____

Company: _____

Email: _____

Additional Attendee Name: _____

Tables will be available for setup at 7:00 a.m. Exhibitors are responsible for supplying their own extension cords and power strips. The vendor cost of \$100.00 includes one six-foot table and lunch/breaks for one attendee. Additional lunch/break tickets per attendee are also \$30.00.

Registration Fees: Booth and one attendee ☐ **\$100.00**

Additional Attendee ☐ **\$30.00**

Credit Card # _____

Exp: _____ **CVV:** _____ **Billing Zip Code:** _____

To Register: Mail, email or fax completed form and payment to:

Oregon ABPA Attn: Tonya Bilderbeck

150 East Main St. Hillsboro, OR 97123

Tonya.Bilderbeck@Hillsboro-Oregon.gov

Fax: 503-615-6595