



OPGA Member Designation Form

TO: Össur Americas, Inc. ("Supplier")

FOR: Orthotic Products Only RE: Supplier Partner Agreement between Össur Americas, Inc. and Orthotic and Prosthetic Group of America ("OPGA") for Supplier Orthotic Products, with Effective Date of October 1, 2020 (the "SPA")

The undersigned Member desires to purchase orthotic products from Supplier pursuant to the SPA referenced above and agrees to abide by the requirements outlined therein. Please take the steps necessary to ensure this Member receives correct SPA contract pricing and all other value-added services and benefits provided pursuant to such contract. Also, please properly credit and report to OPGA all purchases made by this Member per the terms of the SPA.

OPGA Member Name:

Printed Name of Authorized Signatory:

Signature of Authorized Signatory:

Title of Authorized Signatory:

Phone Number:

E-mail Address:

Date Signed:

Address:

City and State:

Return completed form to both OPGA and Supplier:

OPGA: Email todd.eagen@vgm.com

Supplier Össur Americas, Inc. E-mail: pricing@ossur.com