# SPONSORSHIP CONTRACT (Meeting #250101S)

want this information shared.

# **GOLD WINGS SPONSORSHIP - \$6,750**

As a gold wings sponsor at \$6,750, your organization will receive the following benefits:

- (2) complimentary registrations for the conference
- Recognition as a gold wings sponsor during the conference, on the conference website, and in all conference materials
- Consideration for a speaking role
- Table in the exhibit area for a display
- ☐ Yes, I plan to use my tabletop display.

#### **RETURN COMPLETED FORM TO:**

### AAAE

Attn: Lisa C. Williams, CMP, CEM The Barclay Building, 601 Madison Street Alexandria, VA 22314

E-mail: Lisa.Williams@aaae.org

By submitting this sponsorship contract, the above-named company agrees to pay AAAE in order to quarantee execution of sponsorship benefits. Please note that costs listed above do not represent the full cost of the event or item. AAAE reserves the right to list companies as cosponsors of events or items. Contributions made to AAAE for the sponsorship program will be used to enhance the overall conference experience and help defray the overall costs of the conference. Rosters will only be shared with sponsoring companies after all fees have been paid. This contract serves as a binding legal document and all monies must be paid in full at time of order. By signing this contract, you affirm that you comply with all CANSPAM and GDPR rules and regulations, and any personal information you receive will be handled in full compliance with these requirements. **Please** note, no cancellations or refunds may be issued at any time for sponsorship.

#### **COMPANY INFORMATION**

☐ Note: this company information will be listed publicly. Check this box if you do **not** 

If purchasing an exhibit display, the person listed below will receive the complimentary registration unless otherwise noted.

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## **PAYMENT METHOD**

No refunds or cancellations are given at any time.

- Please invoice me
- Enclosed is my check payable to **AAAE**
- O Upon receipt of this form, please charge my card listed below:

Account #: \_\_\_\_\_

Exp. Date: \_\_\_\_\_ CVV: \_\_\_\_

Signature: \_\_\_\_\_\_Date:\_\_\_\_\_

Payment Amount:

### **QUESTIONS?**

Please visit the event <u>website</u> for more information or contact <u>Lisa C. Williams, CMP,</u>

<u>CEM</u> with additional questions or to submit your contract.