



SPONSORSHIP/ADVERTISING CONTRACT

2018 SPONSOR/ADVERTISER CONTACT INFORMATION

First Name:		Middle Initial:		Last Name:	
Title:					
Company:					
Address:					
City:		State:		ZIP:	
Phone:		Email:			
Fax:		Member of:	<input type="checkbox"/> AEMA	<input type="checkbox"/> ARRA	<input type="checkbox"/> ISSA

2018 ASSOCIATION PARTNER

DESIRED PLACEMENTS WILL BE REQUESTED BY EMAIL | A LA CARTE SPONSORSHIPS AVAILABLE THROUGH EVENT SITES

MARQUEE Association Partner:	<input type="checkbox"/> AEMA	<input type="checkbox"/> ARRA	<input type="checkbox"/> ISSA	<input type="checkbox"/> \$ 20,000
CHAMPION Association Partner:	<input type="checkbox"/> AEMA	<input type="checkbox"/> ARRA	<input type="checkbox"/> ISSA	<input type="checkbox"/> \$ 15,000
SUSTAINING Association Partner:	<input type="checkbox"/> AEMA	<input type="checkbox"/> ARRA	<input type="checkbox"/> ISSA	<input type="checkbox"/> \$ 10,000

2018 ADVERTISER

ALL FEES ARE NET, NON-COMMISSIONABLE | SUBMISSION & DISTRIBUTION DATES WILL BE PROVIDED UPON CONTRACTING

GOLD Advertising Bundle	<input type="checkbox"/> \$ 4,000
SILVER Advertising Bundle	<input type="checkbox"/> \$ 2,500
PPRA Connections Ad - Single Insertion, ISSUE REQUESTED:	<input type="checkbox"/> \$ 750
eBrief Ad - Single Insertion, ISSUE REQUESTED:	<input type="checkbox"/> \$ 500
Website Banner Ad - 3 month Insertion, MONTHS REQUESTED:	<input type="checkbox"/> \$ 750

PAYMENT INFORMATION

Total Amount Enclosed:				
Payment by:	<input type="checkbox"/> Visa	<input type="checkbox"/> MC	<input type="checkbox"/> AmEx	<input type="checkbox"/> Check, #:
Card Number:				
Expiration Date:		CVV#		
Card Holder Name:				

Fax: (630) 790-3095 | Email: kristio@cmservices.com (please encrypt if sending credit card information)

Mail: AEMA-ARRA-ISSA, 800 Roosevelt Rd, Bldg C-312, Glen Ellyn, IL 60137