

# AAIDD Annual Meeting Sponsor & Exhibit Engagement Form

Send this form Attn: Maria Alfaro at AAIDD, 8403 Colesville Rd. Silver Spring, MD 20910  
 Fax 202-387-2193, or [maria@aaidd.org](mailto:maria@aaidd.org)

## COMPANY INFORMATION

Company/Organization Name: \_\_\_\_\_  
 Primary Contact's Name/Title: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Telephone: \_\_\_\_\_ E-mail: \_\_\_\_\_  
 Website: \_\_\_\_\_

### SPONSORSHIP PACKAGES

- Platinum Sponsor \$ 15,000
- Gold Sponsor \$ 10,000
- Silver Sponsor \$ 5,000
- Bronze Sponsor \$ 4,000
- Copper Sponsor \$ 3,000

*All sponsors receive a complimentary exhibit*

### BAG INSERTS

- Notepads \$ 3,000
- Mousepad \$ 2,500
- Reusable face masks \$ 2,000
- Pen \$ 1,500
- One 8.5x11-inch single page item \$ 1,500
- Small promo items \$ 1,000

### A-LA-CARTE-SPONSORSHIP ITEMS

- Plenary Sponsor \$ 8,000
- E-Posters Sponsor \$ 6,000

### EXHIBIT FEE

- Exhibitor Fee \$ 450.00

### AUTHORIZED SIGNATURE

By signing this application I acknowledge that as a representative of this company, I have read the rules and regulations outlined on page 7 of this prospectus. I also understand this application will become a binding contract upon acceptance and confirmation by AAIDD.

Authorized applicant signature \_\_\_\_\_

Date: \_\_\_\_\_

### TOTALS

<b>Sponsor package</b>	<b>= \$</b>
<b>A-la Carte Sponsorship</b>	<b>= \$</b>
<b>Bag Inserts</b>	<b>= \$</b>
<b>Exhibit Fee</b>	<b>= \$</b>

**TOTAL = \$**

### PAYMENT INFORMATION—Select a payment method

- Check Enclosed (Payable to AAIDD)     Invoice me (P.O. Attached)
- Visa     MasterCard     American Express     Discover     Diners Club

Card Number \_\_\_\_\_

Expiration Date \_\_\_/\_\_\_/\_\_\_ - \_\_\_/\_\_\_/\_\_\_    Security Code \_\_\_\_\_

*Is the credit card billing address is different from the one provided above, please enter it here:*

\_\_\_\_\_