

# SPONSOR COMMITMENT FORM

## 2018 CUSTOMER CONNECTIONS CONFERENCE

NOVEMBER 4-7, 2018 | WALT DISNEY WORLD AND SWAN RESORT | ORLANDO, FLORIDA



### Company Information

Please make sure your representative-in-charge handles all behind the scenes arrangements. All sponsor logistics information will be emailed to this person.

Representative-in-charge \_\_\_\_\_ Title \_\_\_\_\_

Company \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone \_\_\_\_\_ Email \_\_\_\_\_

Website \_\_\_\_\_

	<b>Elite Corporate Associate</b>	<b>Corporate Associate</b>	<b>Nonmember</b>
<input type="checkbox"/> <b>Elite Sponsor (7782)</b> We want a display table in the registration area all week <input type="checkbox"/> Yes <input type="checkbox"/> No We want an exhibit table at the Sponsor Showcase <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>\$5,000</b>	<b>\$6,000</b>	<b>\$12,000</b>
<input type="checkbox"/> <b>Diamond Sponsor (7783)</b> We want a display table in the registration area all week <input type="checkbox"/> Yes <input type="checkbox"/> No We want an exhibit table at the Sponsor Showcase <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>\$ 4,000</b>	<b>\$ 5,000</b>	<b>\$10,000</b>
<input type="checkbox"/> <b>Platinum Sponsor (7784)</b> We want an exhibit table at the Sponsor Showcase <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>\$ 3,500</b>	<b>\$ 4,500</b>	<b>\$9,000</b>
<input type="checkbox"/> <b>Gold Sponsor (7785)</b> We want an exhibit table at the Sponsor Showcase <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>\$ 3,000</b>	<b>\$ 4,000</b>	<b>\$8,000</b>
<input type="checkbox"/> <b>Mobile App Sponsor (7786)</b> We want an exhibit table at the Sponsor Showcase <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>\$ 2,500</b>	<b>\$ 3,500</b>	<b>\$7,000</b>
<input type="checkbox"/> <b>Silver Sponsor (7787)</b> We want an exhibit table at the Sponsor Showcase <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>\$ 2,000</b>	<b>\$ 3,000</b>	<b>\$6,000</b>

If possible, please do not locate my exhibit table near these companies: \_\_\_\_\_

\_\_\_\_\_

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### Sponsorship Eligibility

Sponsorship at the American Public Power Association 2018 Customer Connections Conference is only for those entities that offer products and services to electricity and telecommunications utilities. The Association shall have the sole right to determine the eligibility of sponsors at this event.

### Sponsorship Cancellation

Once the American Public Power Association receives the sponsor commitment form, benefits will start. Cancellation must be made in writing to [Membership@PublicPower.org](mailto:Membership@PublicPower.org). Sponsors who cancel by September 7 will be liable for 50% of the sponsorship fee. Sponsors who cancel after September 7 will be liable for 100% of the sponsorship fee. If full payment has not been received at the time of cancellation, an invoice for the appropriate amount will be issued.

### Agreement

I understand and agree to comply with the sponsorship eligibility, payment, and cancellation policies. I understand that contributions or gifts made to this association are not deductible as charitable contributions for federal income tax purposes. I also understand that by providing my email and contact information that I am authorizing the American Public Power Association to send information to my organization about upcoming events, programs, and services via these means.

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Representative-in-charge

Title

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Signature

Date

### Payment Information

Fifty percent of the sponsorship fee is due at upon commitment. Full payment is due October 5. All fees to be paid in U.S. funds. To qualify for the member rate, the sponsoring company must be a member. Individual members cannot receive the member discount on behalf of a sponsoring company that is not an Association member.

- Enclosed is a check payable to American Public Power Association.
- Please bill me for payment (Members only). PO# (optional) \_\_\_\_\_.
- I am paying via Wire/ACH payment. Please have an Association finance employee contact me.
- Please charge my:  Visa  MasterCard  American Express  Discover

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Card number

Exp. date

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Amount to charge to card \$

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Name as it appears on card

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Cardholder signature

### For Association use:

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Order ID/Event

If you're paying via credit card, wire/ACH payment, or electing to be billed, please email ([Membership@PublicPower.org](mailto:Membership@PublicPower.org)) or fax (202.495.7503) the completed sponsor commitment form.

If you're paying via check, please email ([Membership@PublicPower.org](mailto:Membership@PublicPower.org)) or fax (202.495.7503) the completed sponsor commitment form and then mail a copy of it with your payment to American Public Power Association • P.O. Box 418617 • Boston, MA 02241-8617.