



AAPM Sponsorship Application • 3rd AAPM Spring Clinical Meeting

March 15–18, 2014 • Denver Marriott Tech Center • Denver, CO

Please Complete and Submit This Form to AAPM By February 3, 2014

Section 1: ORGANIZATION INFORMATION

Organization Name: _____

(List the name of your organization to appear in AAPM Promotional materials)

Mailing Address: _____

City: _____ State: _____ Zip/Postal Code: _____ Country: _____

E-mail (required): _____ Tel: _____ Fax: _____

Section 2: CONTACT PERSON

Name: _____ Title: _____

Mailing Address: _____

City: _____ State: _____ Zip/Postal Code: _____ Country: _____

E-mail (required): _____ Tel: _____ Fax: _____

Section 3: SPONSORSHIP REQUEST

- Wireless for the AAPM Meeting Rooms and Exhibit Hall - \$5,000 (limited to one sponsor)
- Welcome Reception - \$3,000 per sponsor
- Lunch Sponsors - \$2,000 per sponsor / per day
 - Saturday
 - Sunday
- ~~Badge Lanyards - \$2,000 (limited to one sponsor) ****Commitment/Logo Required By February 3rd****~~
- Morning and Afternoon Breaks - \$1,000 per sponsor (6 Sponsorships Available)

Saturday:	<input type="checkbox"/> 9:30 am	<input type="checkbox"/> 3:30 pm
Sunday:	<input type="checkbox"/> 9:30 am	<input type="checkbox"/> 3:30 pm
Monday:	<input type="checkbox"/> 9:30 am	<input type="checkbox"/> 3:30 pm
- Mobile Device Charging Station - \$500 per sponsor

Section 4: Authorized Signature

Signature: _____ Title: _____

Printed Name: _____ Date: _____

By signing this agreement, you agree and give AAPM permission to bill you for the sponsorship items you have selected.

INSTRUCTIONS FOR SUBMITTING APPLICATION

- Upon receipt of Sponsorship Form, Exhibitors will be sent an invoice for the amount of sponsorship selected.
- Forward payment to the Post Office Box indicated on the invoice.
- DO NOT send payment to AAPM Headquarters.
- Full payment can be submitted in the form of either a credit card payment or check in US funds.
- Credit cards accepted include Visa, Master Card, Discover Card, and American Express.
- Checks should be payable to the AAPM
- All payments should be submitted upon receipt of invoice.

Please fax, e-mail sponsorship form to:

Rachel Smioldo, One Physics Ellipse, College Park, MD 20740, (EMAIL) rachel@aapm.org, (FAX) 301-209-0862