

Order Form



APNA 32nd Annual Conference | October 24-27, 2018
Greater Columbus Convention Center | Columbus, OH

YES! My company will be a sponsor of the APNA 32nd Annual Conference.

SPONSOR AND CONTACT INFORMATION

Company Name (IMPORTANT: Complete as you want the name to appear in the program book)

Name of Contact

Address

City/State/Zip Code

Telephone/Fax

Email address (required)

Signature of contact

CREDIT CARD INFORMATION

VISA MASTERCARD AMEX DISCOVER

Card Number

Expiration Date

Name as it appears on card

Signature

Billing address

City/State/Zip

Sponsorship Selection

- | | |
|---|---|
| <input type="checkbox"/> Exclusive Sponsorship:
Friday
Fee: \$20,000 | <input type="checkbox"/> Badge Holders
Fee: \$8,000 |
| <input type="checkbox"/> Attendee Survival Kit
Fee: \$15,000 | <input type="checkbox"/> Exclusive Sponsorship:
Featured Exhibitor
Fee: \$5,000 |
| <input type="checkbox"/> Attendee Wifi
Fee: \$15,000 | <input type="checkbox"/> Keynote Address
Fee: \$5,000 |
| <input type="checkbox"/> Audio/Visual
Exclusive: \$15,000
Shared: \$5,000 | <input type="checkbox"/> Beverage Breaks
Fee: \$4,000 |
| <input type="checkbox"/> Mobile App
Fee: \$10,000 | <input type="checkbox"/> Tote Bag Insert
Exhibiting Company: \$1,000 (1)
Exhibiting Company: \$1,300 (2)
Non-exhibiting Company: \$2,000 |
| <input type="checkbox"/> Adhesive Cell Phone
Wallet/Pocket
Fee: \$10,000 | |

TOTAL =

**Please mail or email this form
and send checks to:**

APNA Sponsorship Opportunities
Attn: Leslie Hoopengardner
3141 Fairview Park, Ste 625
Falls Church, VA 22042
Phone: 571-533-1934
Email: LHoop@apna.org