

Sponsorship Form

Sponsoring Company _____

Contact Name _____

Title _____

Address _____

City _____ State _____ Zip _____

Preferred Phone _____ Office Cell Email _____

Brand to Recognize _____

Brand Contact Name _____

Title _____

Preferred Phone _____ Office Cell Email _____

Please select sponsorship:

- | | | | |
|--|---------------------------------|----------------------------------|---|
| <input type="checkbox"/> Breakfast Session - \$30,000 | <input type="checkbox"/> Monday | <input type="checkbox"/> Tuesday | <input type="checkbox"/> Convention Mobile App - \$5,000 |
| <input type="checkbox"/> Networking Reception - \$10,000 | | | <input type="checkbox"/> Retailer Refreshment Station - \$5,000 |
| <input type="checkbox"/> Monday Annual Membership Luncheon - \$7,500 | | | <input type="checkbox"/> Café NFRA Wi-Fi - \$5,000 |
| <input type="checkbox"/> Tuesday Awards Luncheon - \$7,500 | | | <input type="checkbox"/> NFRA Business Center - \$5,000 |
| <input type="checkbox"/> Taste of Excellence Spirits Station - \$5,000 | | | <input type="checkbox"/> Café NFRA Beverage Station - \$5,000 |
| <input type="checkbox"/> Member Appreciation Reception Bar - \$5,000 | | | <input type="checkbox"/> General Sponsorship - \$2,500 |

Payment Information

- Enclosed check (*US Funds only*) payable to NFRA
- Visa MasterCard
- Discover American Express

Card Number _____

Expiration Date _____

Name on Card _____

Signature _____

Please invoice me

Please return this form with payment to:

NFRA
4755 Linglestown Road, Suite 300
Harrisburg, PA 17112
Fax: (717) 657-9862
Email: nfra@nfraweb.org
Phone: (717) 657-8601

SUBMIT

**To receive maximum exposure for your
sponsorship contribution, please reply by
Friday, May 31, 2019**