

GASP Exhibit | Sponsorship Registration Form

1 Registrant Information

Company Name (as you want it to appear in the program)

Office Contact Name

Mailing Address City State Zip

Email (req.) Phone Fax

2 Choose an Annual Sponsor Level

- TRIPLE DIAMOND SPONSOR \$20,000
- DOUBLE DIAMOND SPONSOR \$15,000
- DIAMOND SPONSOR \$10,000
- PLATINUM SPONSOR \$7,500
- GOLD SPONSOR \$5,000
- SILVER SPONSOR \$2,500
- BRONZE SPONSOR \$1,250
- SPONSOR \$500

3 Choose a Meeting Exhibit Level

Early Registration Prices | Add \$100 per level after March 1, 2010

- EMERALD EXHIBITOR \$2,800
 - RUBY EXHIBITOR \$2,100
 - SAPPHIRE EXHIBITOR \$1,700
 - AMETHYST EXHIBITOR \$1,250
 - Add'l Exhibit Representative* ___ x \$150
 - Add'l Exhibit Table* ___ x \$500
- *see # allowed by exhibit level selected*

4 Select Add'l Support Opportunities

- | | |
|--|--|
| <input type="checkbox"/> Board and Keynote Speaker Dinner, \$5,000 | <input type="checkbox"/> Coffee/Tea \$1,000 |
| <input type="checkbox"/> Audio Visual/Technical Support, \$1,000 | <input type="checkbox"/> Soft Drinks/Water \$600 |
| <input type="checkbox"/> Door prize Donation (Must be valued at \$250 or more) | <input type="checkbox"/> Pastries/Bagels \$500 |
| <input type="checkbox"/> Print Marketing Amount: \$ _____ | <input type="checkbox"/> Fruit \$750 |
| Description _____ | <input type="checkbox"/> Hors d'oeuvre \$500 |
| <input type="checkbox"/> Online Marketing Amount: \$ _____ | <input type="checkbox"/> Mid-morn Snacks \$500 |
| Description _____ | <input type="checkbox"/> Cocktail Reception \$2500 |
| <input type="checkbox"/> Contributor (No Exhibit) \$500 | |

8 Payment Information

- Check *Please make payable to GASP.*
- American Express MC
- Visa Discover

Card Number Expiration Date CID#

Name as it appears on the card

Billing Address

City State Zip

5 Name Badges

Main Onsite Contact | Name Badge 1

Email (req.)

Add'l Badge Name

Add'l Badge Name *

Add'l Badge Name *

**see # allowed by exhibit level selected*

6 Company Description (when applicable)

7 Registration Total

#2 Total-Sponsor Level \$ _____

#3 Total-Exhibit Level \$ _____

#4 Total-Add'l Support \$ _____

TOTAL \$ _____

9 Submit Completed Forms & Payment

Fax: (305) 422-3327

or

Mail: GASP

6134 Poplar Bluff Cir., Ste 101
Norcross, GA 30092

Submission Checklist

- Registration Form
- Shipping/Electrical Form
- Contract
- Payment

Online Registration is also available at
www.gasleep.org