



**Annual Meeting**  
**CORPORATE SPONSORSHIPS:**

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<b>Corporation Name:</b>		<b>Date:</b>	
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<b>GOLD AND SILVER SPONSORSHIPS:</b>			
<input type="checkbox"/> <b>GOLD SPONSOR - \$10,000 per year</b>		<input type="checkbox"/> <b>SILVER SPONSOR - \$5,000 per year</b>	
<b>CONFERENCE SPONSORSHIPS: <i>(Sponsors do not pay an exhibit fee)</i></b>		<b>Full</b>	<b>Your Pledge</b>
Conference binder – sponsor’s page included on back cover.		<input type="checkbox"/> \$3,000	<input type="checkbox"/> \$ _____
Program brochure		<input type="checkbox"/> \$2,000	<input type="checkbox"/> \$ _____
Breakfast, April 11		<input type="checkbox"/> \$2,000	<input type="checkbox"/> \$ _____
Coffee break, April 11		<input type="checkbox"/> \$1,200	<input type="checkbox"/> \$ _____
Lunch, April 11		<input type="checkbox"/> \$3,500	<input type="checkbox"/> \$ _____
Beverage break, April 11		<input type="checkbox"/> \$1,200	<input type="checkbox"/> \$ _____
Reception, April 11		<input type="checkbox"/> \$6,000	<input type="checkbox"/> \$ _____
Breakfast, April 12		<input type="checkbox"/> \$2,000	<input type="checkbox"/> \$ _____
Coffee break, April 12		<input type="checkbox"/> \$1,200	<input type="checkbox"/> \$ _____
Lunch, April 12		<input type="checkbox"/> \$3,500	<input type="checkbox"/> \$ _____
<b>CONFERENCE EXHIBITORS ONLY:</b>			
<input type="checkbox"/> <b>\$1,000 + \$350 registration fee for each attendee.</b>			

**METHOD OF PAYMENT:**

- Mail application form with check (payable to AFROC) or Visa/ Master Card information to:**  
 AFROC  
 12100 Sunset Hills Road, Suite 130  
 Reston, VA 20190 Phone: 703-234-4050  
 Fax application form with Visa / Master Card information to AFROC – 703-435-4390
- Bill us; fax or mail application form**

<b>Name as it appears on credit card:</b> _____	
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