

The MASAE Mid-Year Meeting
Web 3.0 – Immersing Yourself
in Changing Technology
Sponsor & Exhibitor Registration Form
Wednesday, June 5, 2013 * The Inn at Penn, Philadelphia

Contact Person Name: _____

Company: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

| SPONSORSHIP OPPORTUNITIES | | PRICING |
|--|--|--|
| <input type="checkbox"/> | Morning Keynote Presentation & Breakfast Sponsor <i>Includes: tabletop exhibit; introduction of your firm and services and introduction of keynote speaker; logo in all promotions and signage</i> | \$1,000 (Early Bird: \$850 until May 1) |
| <input type="checkbox"/> | Afternoon Keynote Presentation <i>Includes: tabletop exhibit; introduction of your firm and services and introduction of keynote speaker; logo in all promotions and signage</i> | \$1,000 (Early Bird: \$850 until May 1) |
| <input type="checkbox"/> | Luncheon Sponsor <i>Includes: tabletop exhibit; welcome to attendees at lunch; logo in all promotions and signage</i> | \$1,000 (Early Bird: \$850 until May 1) |
| <input type="checkbox"/> | Breakout Session Sponsors – ONLY 4 AVAILABLE! <i>Includes: tabletop exhibit; logo in all promotions and signage; introduction of your firm and services at breakout session</i> | \$700 (Early Bird: \$600 until May 1) |
| Sponsorships also include a 10% discount off the exhibit fee for the MASAE Annual Conference in December should you plan to exhibit, plus one representative with admission to Education Sessions. | | |

| EXHIBIT ONLY | | PRICING |
|--------------------------|--|--------------|
| <input type="checkbox"/> | Tabletop Exhibit (must be MASAE Associate Member) <i>Includes: six-foot draped table placed side-by-side to others. Also includes full event registration for one representative and admission to Education Sessions. There are a limited number of tabletops available.</i> | \$300 |

PAYMENT INFORMATION

- Check Enclosed Charge My Credit Card MC Visa Amex Discover
(credit card charges will appear on your statement from Peak Management Solutions)

Cardholder Name (please print): _____

Card Number: _____

Expiration Date: _____ CVV: _____

Billing Address/Zip Code: _____

Return this form with payment to: MASAE • 170 Kinnelon Rd, Ste 33 • Kinnelon, NJ 07405 OR FAX to 973-838-7124