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Sponsorship Agreement Form 2019 NFDA International Convention & Expo October 27-30, 2019 – McCormick Place Convention Center, Chicago, IL

Sponsoring Company_____

DIRECTORS ASSOCIATION

Address (may be published in p	romo materials)			
City	State/Province	Postal Code	Country	
Phone	Fax			
Email		V	Vebsite	
Contact (may be published in pr	omo materials)	Positi	on/Title	

Sponsorship Level

ip level.		
\$50,000	🗖 Gold	\$20,000
\$40,000	Silver	\$10,000
\$30,000	Bronze	\$5,000
	\$50,000 \$40,000	\$50,000 Gold \$40,000 Silver

Selected Sponsorship Opportunities

Total Due: \$		
Method of Payment		
Credit Card Fax to 262.789.6977 or call Business	Development at 800.228.6332	
American Express MasterCard	VISA 🗖 Discover	
Card Number	Expiration Date	
Cardholder's Name (print)	Signature	
Authorized Signature	Title	
Check (U.S. dollars drawn on U.S. bank) payable t	to NFDA	
Our organization acknowledges that NFDA retains the sole right to	select the presenter(s) and direct all aspects of any event.	
Signature	Date	
Agreement Submission		

Mail this signed agreement with payment to: NFDA Business Development Department – Sponsorship 13625 Bishop's Dr., Brookfield, WI 53005

Fax this signed agreement to +1.262.789.6977 Email this signed agreement to advertising@nfda.org