

AVMS SPONSORSHIP AGREEMENT FORM sponsorships are granted on a first come first serve basis.

Company: _____

Contact Person: _____ Title / Position: _____

Phone: _____ Email: _____

Website: _____

SPONSORSHIP LEVEL CHOICES: MEMBERSHIPS RUN JUNE 1 THROUGH MAY 31 ANNUALLY.

Platinum - \$1000.

- Invitation to speak about your organization at an AVMS meeting.
- 4 Tickets to AVMS special events
- Your Company logo on our banner - Your company logo on our website.

Gold - \$500.

- 2 Tickets to AVMS Special events - Your logo on our banner - Your logo on our website.

Silver - \$300

- Your company name on our banner - Your company name on our website.

Friend of AVMS (Individual) - \$100

- Recognition on our website as a Friend of AVMS.

Method of Payment:

_____ A check is enclosed and made payable to Del Webb AVMS (SPONSORSHIP)

_____ I Authorize a charge of \$ _____ to Credit Card

_____ VISA _____ MC _____ AMEX

Name on Card (exactly as printed): _____

Card # _____ Exp: _____ CVV Code: _____

Printed Name: _____

Signature: _____ Date: _____

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