



Your Resource in the Vacation Ownership Industry

2015 SPONSORSHIP AGREEMENT

Sponsor Contact Information

Contact Name _____

Sponsor Company _____

Mailing Address _____

City | State/Province
Postal Code | Country _____

Telephone _____

Fax _____

E-mail Address _____

Web Address (if applicable) _____

Billing Information

Contact Name _____

Company _____

Mailing Address _____

City | State/Province
Postal Code | Country _____

Telephone _____

Fax _____

E-mail Address _____

Web Address (if applicable) _____

Sponsors Index Listing

Sponsor's name as it will appear in the Sponsor Index:

Attendee	Roundtable Captain
1	<input type="checkbox"/>
2	<input type="checkbox"/>

*Future event attendees must submit their names fourteen (14) days prior to the event date.

2015 ARDA Regional Events

Northeast (NE)

Portsmouth, NH
June 1-2, 2015

Southeast (SE)

Charleston, SC
September 17-18, 2015

Rockies (R)

Salt Lake City, UT
October 19-20, 2015

Southwest (SW)

San Diego, CA
October 22-23, 2015

Sponsorship Packages

<input type="checkbox"/> Regional Event Sponsor — \$3,000 <ul style="list-style-type: none"> • Forum Session Sponsor / Networking Break Sponsor / Educational Session Sponsor • Two items in Regional Marketplace • Two complimentary registrations • Captain or Co-Captain a round table discussion (Limited space, first available) • Pre- and post-event attendee lists • Recognition ARDA website, signage, printed materials, and from event chair • Opportunity to address attendee at your unique meal or educational event • Company color logo use 	<input type="checkbox"/> NE <input type="checkbox"/> SE <input type="checkbox"/> R <input type="checkbox"/> SW TOTAL _____
<input type="checkbox"/> Regional Sponsor — \$1,000 <ul style="list-style-type: none"> • One item in Regional Marketplace • One complimentary registration • Captain or Co-Captain a round table discussion (Limited space, first available) • Pre- and post-event attendee list • Recognition on ARDA website, signage, printed materials, and from event chair • Company name use 	<input type="checkbox"/> NE <input type="checkbox"/> SE <input type="checkbox"/> R <input type="checkbox"/> SW TOTAL _____

Sponsor Name _____

Agrees to pay ARDA the TOTAL above to sponsor the regional shows selected thirty (30) days from the execution date of this Agreement.

Authorized Signature _____

Executed this date _____

Print Name _____

Company Name _____

Send Agreement to:

Jonathan Fetsko, ARDA

1201 15th Street, N.W., Suite 400
Washington, DC 20005

p (202) 371-6700

f (202) 289-8544

e jfetsko@arda.org