SPONSORSHIP AUTHORIZATION FORM

May 3-5, 2024 Embassy Suites, Nashville, TN

AARO is offering limited sponsorship opportunities for the Spring 2024 Conference. Sponsorship requests will be approved on a first come, first serve basis.

| Company | Name | | | | |
|--|---------------------------------|---|-------------------------------|--------------------------------|--|
| Primary C | ontact Nam | e | | | |
| Primary C | ontact Phor | ne Cor | Company Phone | | |
| Contact E | mail | | | | |
| Company | Address | | | | |
| Website U | IRL _ | | | | |
| | | | | | |
| | Choice | Sponsorship Opportunity | Amo | ount | |
| | 1 | Lunch One Available | \$3,5 | 500 | |
| | 2 | Break Three Available | \$2,5 | 500 | |
| | 3 | Platinum Unlimited | \$2,0 | 000 | |
| | 4 | Gold Unlimited | \$1,0 | 000 | |
| | 5 | Silver Unlimited | \$50 | 00 | |
| | 6 | Table Six One-Hour Sessions* | \$300 | | |
| to attendees; and during ev | or hand out ir ery lunch hou | h and would provide a space for the spor formation. Tables are available in one-h rr so as not to interfere with conference c | our slots before the content. | conference starts each morning | |
| I would like | e to be a sp | onsor of the AARO 2024 Spring C | Conference at cho | ice number: | |
| Payment Method: □ Enclosed Check □ EFT □ Invoice Me | | | Me Via Square | ☐ *Credit Card | |
| * Name on Card: | | | *Card Billing Zip Code | | |
| * Card Number | | | *Expiration Date _ | *CVV | |
| your name, lo | go, or other n | being a sponsor, you give AARO permi neans in any conference marketing mate ur organization's logo with this form. | | | |

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AARO Federal Identification Number: 91-1545335

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