

# SPONSORSHIP FORM

APEGGA Permit Number: \_\_\_\_\_

Organization's Contact Person:

Mr.  Ms.  Dr. First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Professional Designation:  P.Eng.  P.Geol.  P.Geoph.  Other \_\_\_\_\_

Job Title: \_\_\_\_\_

Organization's name as it should appear in the program and on signage:

\_\_\_\_\_

Address: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

**Our organization will sponsor the 2006 APEGGA Annual Conference at the following level:**

Patron (\$8,000)  Benefactor (\$6,000)  Supporter (\$4,000)  Contributor (\$2,000)

Payment Method (please choose one of the three options):

Invoice our organization for our sponsorship commitment

Charge the credit card account listed below for our organization's sponsorship commitment

Credit Card Number: \_\_\_\_\_

Card Type:  VISA  MasterCard  American Express

Expiry Date: \_\_\_\_\_ Signature: \_\_\_\_\_

Enclosed is a cheque for \$\_\_\_\_\_ to cover our organization's sponsorship commitment

My organization wishes to donate \_\_\_\_\_ tickets for use by students and volunteers.  
(number)

**To meet publication deadlines, your sponsorship commitment must be received by March 15, 2006. Payment may follow at a later date.**

**Completed forms can be faxed to Barb Robinson at 780-425-1722, or mailed to: APEGGA, 1500 Scotia One, 10060 Jasper Avenue NW, Edmonton AB T5J 4A2**