



2010 ANNUAL CONFERENCE SPONSORSHIP OPPORTUNITIES

CONTACT INFORMATION

Organization: _____

Full Name: _____

Title: _____

Address: _____

City, State, Zip: _____

E-mail: _____

Phone: _____

SPONSORSHIP

Please check which sponsorship you wish to reserve. Sponsorships are only available to VRMA supplier members.

Annual Conference Sponsorships

<input type="checkbox"/> <i>Item</i>	<i>Cost</i>	<i>Available</i>
<input type="checkbox"/> Concurrent Session Room (Mon, 11/1 or Tues, 11/2)	\$2,000	9
<input type="checkbox"/> Snack Breaks	\$3,500	3
<input type="checkbox"/> Conference Flash Drive	\$6,000	1
<input type="checkbox"/> Lunch (Mon, 11/1 or Tues, 11/2)	\$10,000	2

Knibbe Ranch Event (Tues, 11/2) Sponsorships

<input type="checkbox"/> <i>Item</i>	<i>Cost</i>	<i>Available</i>
<input type="checkbox"/> Gunfight	\$1,000	1
<input type="checkbox"/> Transportation	\$1,000	12
<input type="checkbox"/> Line Dance Instructor	\$1,500	1
<input type="checkbox"/> Dessert Buffet Tables	\$2,500	1
<input type="checkbox"/> Oreo (longhorn steer)	\$3,000	1
<input type="checkbox"/> Campfire with Cigars & Cognac	\$3,500	1
<input type="checkbox"/> Hitchhikers	\$4,000	1
<input type="checkbox"/> Dinner Buffet Tables	\$5,000	1
<input type="checkbox"/> Photography	\$6,000	1
<input type="checkbox"/> Venue	\$6,000	1
<input type="checkbox"/> Fireworks	\$8,000	1

PAYMENT

Total Sponsorship Payment Due \$ _____

Payment Options (Payments must be made in U.S. dollars drawn from a U.S. bank.)

_____ Check made payable to "VRMA" _____ Credit Card (circle type): AmEx MC Visa Discover

Name on card: _____ Card Number: _____

Expiration Date: _____ CVV Number: _____ Billing Zip Code: _____

Signature: _____

SPONSORSHIP FORM AND PAYMENT SHOULD BE SENT TO:

Vacation Rental Managers Association
9100 Purdue Road, Suite 200 | Indianapolis, IN 46268 | F: 317-454-8316
VRMA Federal Tax ID: 93-094-8165
For additional information: 317-454-8315 | vrma@vrma.com