

ACCOUNTING: Post Office Box 50625 * Jacksonville Beach, FL 32240 * 904-404-7857 * rjweventproductions@mail.com**Registration - Conference & Expo for Children of Aging Parents**

Name _____

Business _____

Address _____

Phone / email _____

Category _____

Please Reserve my sponsorship and participation at the following events:

- _____ Ponte Vedra - TPC Sawgrass * August 1, 2017
- _____ San Marco - Epping Forest CC * August 24, 2017
- _____ Baymeadows - Deercreek CC * September 12, 2017
- _____ The Beaches – One Ocean * September 26, 2017
- _____ Mandarin - Ramada Inn * October 3, 2017
- _____ Northern St Johns County - St. Johns CC * October 26, 2017
- _____ Intracoastal - Glen Kernan Country Club * November 14, 2017
- _____ Orange Park / Fleming Island – Thrasher Horne Center* December 5, 2017

TYPE OF SPONSORSHIP_____ **Speaker Sponsor** \$ 349.00/event

Speaking Slot * Video of presentation * Table booth space * Full page ad in guide

Attendee contact info * Business information on marketing material * Category Exclusivity

_____ **Exhibit Sponsor** \$ 275.00 / event

Table booth space * Event Guide full page ad * Attendee contact information

Business information on marketing material * Exclusivity in business category

Reservation fee: \$ _____ per event x _____ event[s] = \$ _____

Authorized by: _____ Date _____

Please mail this signed form and fee [payable to RJW] to the accounting address above or if payment by credit card please fill out the section below and scan and email this signed form to RJWeventproductions@mail.com or fax to 888-263-4440

Credit Card Authorization [We can also send a secure payment link upon request via email]

Please charge the credit card below ONE TIME ONLY in the amount of \$ _____

Card Number _____ Exp Date _____

CVS [Security Code] _____ Zip Code Credit Card Bill Is Mailed to: _____

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