

Sponsorship Application Form

Sponsor/Agency Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Title: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

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

Registrant's names: \_\_\_\_\_

Sponsorship level

Exhibitor level      \$5,000       Electricity needed?  
 Sponsor level      \$2,500      Event: \_\_\_\_\_

Specialized sponsor: Contact Carla Wiedmier  
W1006 Lafferre Hall  
Columbia, MO, USA 65211  
Phone: 573-884-8806  
Fax: 573-884-4948  
e-mail: [wiedmierc@missouri.edu](mailto:wiedmierc@missouri.edu)

Method of Payment: Check (Made to University of Missouri) or Credit Card  
(Visa/MasterCard/Discover)

Name on Card: \_\_\_\_\_

Card Type:  Visa  MC  Disc Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_

Address (if different from above): \_\_\_\_\_

Check # \_\_\_\_\_ OR Purchase Order # \_\_\_\_\_

Symposium Approval \_\_\_\_\_  
Robert L. Druce \_\_\_\_\_ Date \_\_\_\_\_

For office use only CEIS #123196 Customer ID # \_\_\_\_\_ Receipt # \_\_\_\_\_