



Sponsor & Exhibitor Application & Agreement

2018 IMCA Specialty Conferences

Please read and return all terms and conditions as outlined in the IMCA Partner, Sponsor, & Exhibitor Agreement.

Company Name: _____

Company Web site: _____

Contact Name: _____ Title: _____

Address: _____

City/State or Province: _____ Zip/Postal Code: _____

Phone: _____ Fax: _____ E-mail: _____

I have read and agree with all terms and conditions as outlined in the IMCA Partner, Sponsor, & Exhibitor Agreement.

Signature: _____ Date: _____

We are sponsoring/exhibiting at the following conference(s):

- | | | | |
|---|---|--|---|
| <input type="checkbox"/> Investment Advisor Forum
<i>January 16-17 New York, NY</i>

<input type="checkbox"/> Sponsor \$25,000
<input type="checkbox"/> Exhibitor \$15,000 | <input type="checkbox"/> Wealth Advisor Forum
<i>October 29-30 Scottsdale, AZ</i>

<input type="checkbox"/> Sponsor \$20,000
<input type="checkbox"/> Exhibitor \$12,000 | <input type="checkbox"/> Masters Series: Advanced Business Strategist
<i>TBD Philadelphia, PA</i>

<input type="checkbox"/> Sponsor \$15,000 | <input type="checkbox"/> Retirement Management Forum
<i>December TBD</i>

<input type="checkbox"/> Sponsor \$15,000 |
|---|---|--|---|

Method of Payment:

- Check (payable to IMCA for the total amount)
 MasterCard
 VISA
 Discover
 American Express

Credit Card #: _____ Exp.: _____

Name on Card: _____ Signature: _____

Please note: Your company information will appear on all conference materials as appears above. The named contact above will receive all exhibiting information regarding the conference. All applications must be accompanied by full payment to secure booth.

Mailing address: IMCA 5619 DTC Parkway, Suite 500 Greenwood Village, CO 80111	Phone and Fax: P: 303.770.3377 F: 303.770.1812
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www.IMCA.org