



**2018 IMCA Annual
Conference Experience**
Nashville, TN | May 6-9, 2018

— and —

2018 IMCA Specialty Conferences

**Partner
Application & Agreement**

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

Company Name: _____

Company Website: _____

Contact Name: _____ Title: _____

Address: _____

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

Phone: _____ Fax: _____ E-mail: _____

<input type="checkbox"/> Platinum Partner Package: \$120,000	<input type="checkbox"/> Gold Partner Package: \$100,000
<input type="checkbox"/> Silver Partner Package: \$80,000	<input type="checkbox"/> Bronze Partner Package: \$45,000

Payment Amount: _____

Method of Payment: Check (payable to IMCA for the total amount) Check Number: _____

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

Signature: _____ Date: _____

Please note: Your company information will appear on all conference materials as it 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.

<p>Mailing address: IMCA 5619 DTC Parkway, Suite 500 Greenwood Village, CO 80111</p>	<p>Phone and Fax: P: 303.850.3081 F: 303.770.1812</p>
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www.IMCA.org