

# AGA CONFERENCES: 2007-2008 Order Form

**COMPANY INFORMATION**—Please complete this section as you wish to have it printed in the conference program and other marketing materials. **Please type or print clearly.**

COMPANY NAME \_\_\_\_\_

WEBSITE \_\_\_\_\_

**MARKETING CONTACT FOR FINAL PROGRAM**—Who should attendees contact for more information?

NAME \_\_\_\_\_

TITLE \_\_\_\_\_

E-MAIL \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE \_\_\_\_\_ FAX \_\_\_\_\_

**PRIMARY CONTACT**—All information regarding conference logistics will be sent to YOUR attention. This includes the Confirmation Letter, Invoice, Exhibitor Service Kit, Sponsor Shipping Deadlines, etc.

NAME \_\_\_\_\_

TITLE \_\_\_\_\_

ADDRESS (if different from left) \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE \_\_\_\_\_ FAX \_\_\_\_\_

E-MAIL \_\_\_\_\_

**RETURN SIGNED ORDER FORM TO**  
**AGA, 2208 Mount Vernon Avenue**  
**Alexandria, VA 22301**  
**PH: 800.AGA.7211 FAX: 703.548.9367**

## Corporate Partnership

<input type="radio"/> I am already a Corporate Partner	<input type="radio"/> I want to become a Corporate Partner (Choose a level below)	Cost
	<input type="radio"/> Professional Level \$5,000 <input type="radio"/> Sustaining Level: \$2,000	

## National Internal Control & Fraud Conference

	Item description	Cost
<input type="radio"/> Sponsorship	Level/Item(s):	
<input type="radio"/> Program Ad	Size: <input type="radio"/> 1/4 pg <input type="radio"/> 1/2 pg <input type="radio"/> Full pg <input type="radio"/> Back Cover <input type="radio"/> Inside Front Cover <input type="radio"/> Inside Back Cover <input type="radio"/> Inside Right	

## National Performance Management Conference

	Item description	Cost
<input type="radio"/> Sponsorship	Level/Item(s):	
<input type="radio"/> Program Ad	Size: <input type="radio"/> 1/4 pg <input type="radio"/> 1/2 pg <input type="radio"/> Full pg <input type="radio"/> Back Cover <input type="radio"/> Inside Front Cover <input type="radio"/> Inside Back Cover <input type="radio"/> Inside Right	

## National Leadership Conference

	Item description	Cost
<input type="radio"/> Sponsorship	Level/Item(s):	
<input type="radio"/> Exhibit Booth	Size: _____ Booth choices: 1st      2nd      3rd ( _____ X _____ )      4th      5th      6th	
<input type="radio"/> Program Ad	Size: <input type="radio"/> 1/4 pg <input type="radio"/> 1/2 pg <input type="radio"/> Full pg <input type="radio"/> Back Cover <input type="radio"/> Inside Front Cover <input type="radio"/> Inside Back Cover <input type="radio"/> Inside Right	

## Professional Development Conference & Exposition

	Item description	Cost
<input type="radio"/> Sponsorship	Level/Item(s):	
<input type="radio"/> Exhibit Booth	Size: _____ Booth choices: 1st      2nd      3rd ( _____ X _____ )      4th      5th      6th	
<input type="radio"/> Program Ad	Size: <input type="radio"/> 1/4 pg <input type="radio"/> 1/2 pg <input type="radio"/> Full pg <input type="radio"/> Back Cover <input type="radio"/> Inside Front Cover <input type="radio"/> Inside Back Cover <input type="radio"/> Inside Right	

## METHOD OF PAYMENT

CHECK PAYABLE TO AGA (Federal Tax ID #53-0217158)       BILL ME

AMEX       DISCOVER       MASTERCARD       VISA

CARDHOLDER PHONE NO. \_\_\_\_\_

CARD # \_\_\_\_\_ EXP. DATE \_\_\_\_\_

NAME AS IT APPEARS ON CARD \_\_\_\_\_

SIGNATURE \_\_\_\_\_

<b>TOTAL</b>	
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**WE WISH TO AVOID BOOTH PLACEMENT NEAR THE FOLLOWING COMPETITORS:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## AUTHORIZED SIGNATURE

DATE \_\_\_\_\_

This person must be authorized to sign on behalf of the exhibiting company. A signature on this application indicates understanding and agreement to comply with all policies, rules, regulations, terms and conditions in the prospectus and any others issued by AGA; willingness to abide by the payment policy; and agreement that AGA rules and regulations are an integral and binding part of this contract.