



2021 DFW Philanthropy in Action Conference VIRTUAL

June 3-4, 2021

Association Partner Agreement

Association Partners are non-profit associations or other related professional associations who have agreed to market the AFP DFW Philanthropy Conference to their members via their own website with a link to the conference website, via print or electronic newsletters, Facebook or other social media. Association Partner status is designated by conference management.

Please refer to <https://www.dfwphilanthropyconference.com/sponsors-info.asp> for the benefits of partnership.

Company Name: _____

(EXACTLY as it should appear in printed materials)

Primary Contact Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Email: _____

Company URL (for conference website): _____

Social Media Contact Name: _____ Email: _____

Association Partner Commitment

Association Partner - \$100 (admit 1 attendee)

Company representative attending conference:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Email: _____

Up to 2 Additional Attendees

Additional attendees for sponsors listed above x \$125 each. = \$ _____

Additional Attendee #1 Contact Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Email: _____

Additional Attendee #2 Contact Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Email: _____

Association partnership is an important tool in marketing the conference. Please read each comment and check to demonstrate your agreement.

- We understand that marketing efforts will be made between February 2021 and the conference date June 3-4, 2021.
- We understand that the Social Media contact listed above will be contacted directly by Conference PR / Marketing Chair Mark Z. Mourer to coordinate marketing efforts.
- Our Facebook Page Address: _____
- Our Twitter handle: _____
- Our Instagram: _____
- Other marketing tools and details: _____

PAYMENT

- Check enclosed (payable to **AFP Greater Dallas Chapter**)
- Visa / Mastercard / American Express / Discover

Card No.: _____ Exp Date: _____ CSC: _____

Name on Card: _____

Cardholder Signature: _____ Date: _____

Billing address of cardholder, if different than address above:

First Name: _____

Last Name: _____

Organization: _____

Address: _____

City: _____ State: _____ Zip: _____

Information on logo submission, directions, overnight accommodations, and additional conference details will be included in a confirmation email sent to the primary contact listed above, upon receipt of commitment and payment in full. Benefits pertaining to logo inclusion or listing in print or electronic media are pending receipt of commitment before print deadline.

Thank you for your support of AFP and of this excellent professional development opportunity for nonprofit professionals in North Texas and the surrounding region.

***For your protection, if you are paying by credit card,
we recommend that you fax or mail your registration form.***

2021 AFP DFW Philanthropy in Action Conference

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