



2022 DFW Philanthropy in Action Conference

Thursday and Friday, June 16-17, 2022
Irving Convention Center · Irving, Texas

Sponsor Commitment Form

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: _____

Sponsorship Commitment

Presenting Sponsor - \$6,000 (admit 6 attendees) **SOLD**

Opening Plenary Sponsor - \$5,000 (admit 4 attendees) **SOLD**

VIP Reception Sponsor - \$4,000 (admit 4 attendees) **SOLD**

Speaker Sponsor - \$3,500 (admit 4 attendees)

Scholarship Sponsor - \$2,500 (admit 2 attendees)

Whova Conference App Sponsor - \$2,500 (admit 2 attendees)

Exhibit Hall Sponsor - \$2,000 (admit 2 attendees) **SOLD**

If you selected *Speaker Sponsor* above, please select the speaker you wish to sponsor below.

Michelle Gilchrist, EMBA Doug Dillon, CFRE **SOLD** Christopher Plumlee Mark Hobbs Jim Taylor Cheryl Jackson

Company representative(s) or guest(s) attending conference according to level of sponsorship:

BADGE #1

Name: _____

Title: _____

Email: _____

BADGE #3

Name: _____

Title: _____

Email: _____

BADGE #5

Name: _____

Title: _____

Email: _____

BADGE #7

Name: _____

Title: _____

Email: _____

BADGE #2

Name: _____

Title: _____

Email: _____

BADGE #4

Name: _____

Title: _____

Email: _____

BADGE #6

Name: _____

Title: _____

Email: _____

BADGE #8

Name: _____

Title: _____

Email: _____

Additional Badges/Registrations

Email (afpchapteroffice@afpdallas.org) or fax (972-490-4219) name, title, company name and address, city, state and zip, phone, fax and email information per person when purchasing additional badges/registrations below):

Additional attendees for sponsors listed above x \$150 each. = \$ _____

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: _____

How would you best describe your business and/or business services?

Please choose up to two (2) categories for our Company Listing on the conference program:

- | | |
|--|--|
| <input type="checkbox"/> Business Services (i.e., Accounting, Legal, Bank, Employment) | <input type="checkbox"/> Printing |
| <input type="checkbox"/> Fundraising Consulting Services | <input type="checkbox"/> Promotional Products |
| <input type="checkbox"/> Direct Mail | <input type="checkbox"/> Recognition Solutions |
| <input type="checkbox"/> Donor Management Solutions | <input type="checkbox"/> Social Media/E-Communications |
| <input type="checkbox"/> Education and Training | <input type="checkbox"/> Technology Support Services |
| <input type="checkbox"/> Event Planning | |

For questions or for more information, please contact:

Conference Sponsor Chair at sponsorsandexhibitors@dfwpc.org.

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.

Wi-Fi access is available throughout the Irving Convention Center. Detailed exhibitor instructions as well as forms for securing electrical connections can be found at www.dfwphilanthropyconference.com.

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.

**2020 AFP DFW Philanthropy in Action Conference
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