



SPONSORSHIP AGREEMENT & CONTRACT

Company: _____
 Contact Person: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Phone: _____ Fax: _____
 Email: _____

SPONSORSHIP ORDER(S)

Yes! I would like to Sponsor*

	Sponsorship Item	Investment
1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____
Total:		_____

PAYMENT REQUIREMENTS

Full payment is required on all sponsorship commitments. Enclosed is the sponsorship payment: \$ _____

Payment Methods:

Check made Payable to American Trucking Associations

Credit Card: AMEX MasterCard VISA Amount: _____

Credit Card Account #: _____ Expires: _____

Name as it appears on card: _____

Signature: _____

The individual signing this contract is an authorized representative of the company with the full power and authority to sign and deliver a contract, which includes authorizing payment and commitment to the American Trucking Associations for sponsorship support.

Company: _____

Contact: _____

Signature: _____ Date: _____

Please return signed agreement with payment to:

American Trucking Associations
 Attn: Dan Duggan, CEM, Sales & Marketing
 2020 MCE
 950 N. Glebe Road, Suite 210
 Arlington, VA 22203

You can also fax your order to (703) 838-1774.