

## PROMOTIONAL SUPPORT OPPORTUNITIES REQUEST FORM

EXHIBITOR/SUPPORTER: \_\_\_\_\_ CONTACT/TITLE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP/CODE: \_\_\_\_\_ COUNTRY: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_ FAX: \_\_\_\_\_ EMAIL: \_\_\_\_\_

### REQUESTED DAY/DATE OF THE MEETING

**DIAMOND LEVEL....\$150,000**

**PREMIUM PLATINUM...\$100,000**

**PLATINUM...\$75,000**

**GOLD LEVEL...\$50,000**

**SILVER LEVEL...\$25,000**

### PAYMENT METHOD:

WIRE TRANSFER – Please call our offices at +978.927.8330 for wiring information

Check amount enclosed: \$ \_\_\_\_\_

.CREDIT CARD      

Amount to be charged: \$ \_\_\_\_\_

Credit Card Number \_\_\_\_\_

Expiration Date \_\_\_\_\_ Security Code (3-4 numbers on front or back of card) \_\_\_\_\_

**DO NOT EMAIL full credit card information.**

Form must be faxed if credit card number is showing via our secure fax **978.524.0461**. If you prefer to email please leave out the credit card number and in that space write your phone number and we will call you.

\_\_\_\_\_  
Name as it appears on credit card

\_\_\_\_\_  
Cardholder's Signature

Please check if credit card billing address is same as contact information at the top of the form.

Billing address if different than above: \_\_\_\_\_

**Complete and return to:** Yvonne Grunebaum, Director of Industry Relations | HVS

500 Cummings Center, Suite 4400 | Beverly, MA 01915 USA | Phone: +1.978-927-8330 | Fax: 978-524-0461