



GEOTECHNICAL & STRUCTURAL ENGINEERING CONGRESS

PHOENIX, ARIZONA | FEBRUARY 14-17, 2016

Sponsorship Commitment Form

Put sponsoring company information as will appear in printed conference materials

Contact Information:

Sean Scully
ASCE Sales & Marketing Department
1801 Alexander Bell Dr., Reston, VA 20191
Phone: 703-295-6154

Fax or email completed form to
Fax: 703-295-6276 | Email: sscully@asce.org

Company Name: _____

Website Address: _____

Contact Information (Person authorizing sponsorship)

Name: _____

Job Title: _____

Work Phone: _____ Email: _____

Address: _____

Contact Information (Person fulfilling logo, name verification etc., if not same as person above)

Name: _____

Work Phone: _____ Email: _____

Event Information: We are committed to the following business opportunity at COPRI Joint Conference 2015

Business Opportunity Level: _____

Sponsored Event or Item: _____

Total Sponsorship Amount: _____

We agree to the following sponsorship terms and will complete our financial obligation according to the following schedule:

- Payment Attached Due upon Receipt of Invoice
- 50% attached, remainder invoiced November 14th 2015
- 50% invoiced, remainder invoiced November 14th 2015

Payment Information

Name & Signature of individual with authority to make this financial commitment on behalf of the company:

Printed Name: _____ Signature: _____ Date: _____

ASCE is a 501(c)(3) tax-exempt non-profit organization, your gift is tax-deductible to the fullest extent of the law. For tax purposes, if you should wish to designate your gift as a charitable contribution, please refer to the value of each event for the amount of the gift, which is tax deductible. As a business expense, this amount may be treated as an ordinary and necessary expense.

Payment by Check

Make check payable to: ASCE/GeoStructures
Mail check to: ASCE
P.O. Box 79669
Baltimore, MD 21279-0668

Payment by Credit Card

Credit Card Type: AMEX Diners Discover MasterCard VISA
Expiration Date _____ Security # _____
Credit Card # _____
Card Holder Name: _____