

Conference Partner Registration Form

Name of Company: _____

Address: _____

City: _____ State: _____ ZIP: _____

Name of Contact: _____

Title: _____

Phone Number: _____ Fax Number: _____

Email Address: _____

Please select one of the available Partnership Opportunities below:

Partnership Levels		
___	Superhero Level	\$10,000
___	Transformer Level	\$5,000
___	Protector Level	\$2,500
___	Defender Level	\$1,000

Please indicate below if you are a member of the Association of Educational Purchasing Agencies (AEPA)
 ___ Yes ___ No, but I would like to be! ___ No, and I am not interested in joining.

DOOR PRIZE AND PARTICIPANT BAG:

- Option to include materials in conference bag, if materials are received by June 30, 2015.
- Opportunity to sponsor door-prize. Each partner will collect a "bucket of contacts" at their table for the drawing (\$50 value or greater suggested). Partner will receive recognition during drawing at conference luncheon on July 16, 2015, with the option to be present during drawing.

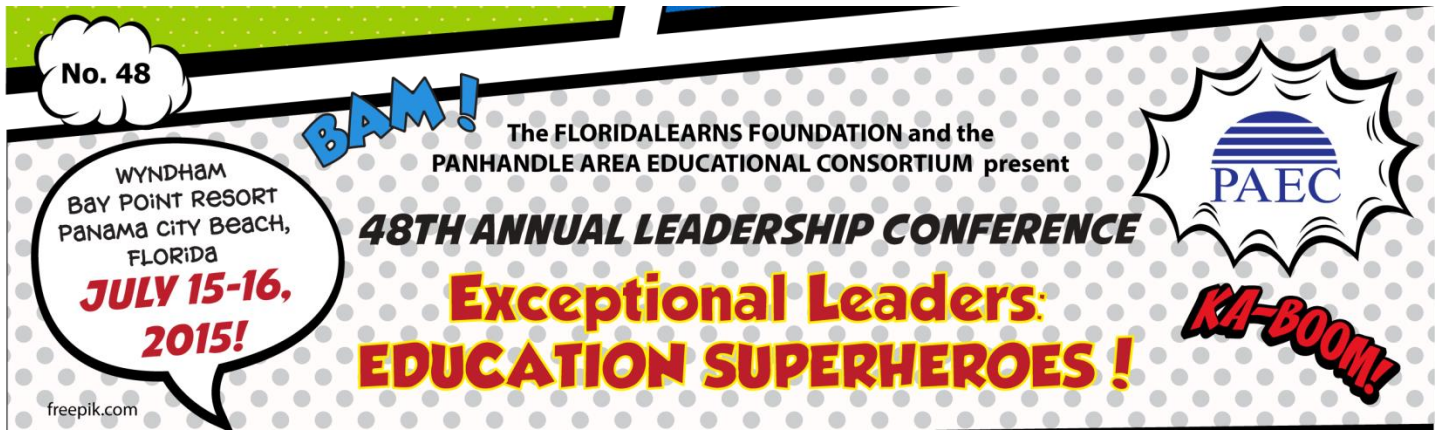
Please use one of the methods below to secure your registration. Exhibit table assignments cannot be made until all registration materials and payment have been received.

Pay by Check	Pay by Credit Card
Make checks payable to: FloridaLearns Foundation Mail check and registration forms to: Bonnie Wertenberger FloridaLearns Foundation P O Box 243 Chipley, FL 32428	Go to http://www.paec.org/leadershipconference2015/partners.aspx Then, fax or email registration forms to: Bonnie Wertenberger, Partnership Chairman Fax: 850-638-6109 Email: wertenbergerb@paec.org

IMPORTANT - This registration will serve as your invoice.

June 1, 2015: Deadline to ensure you receive **all of the appropriate recognition**. Company artwork and logos must be in pdf, eps, tif, gif, or ai format **AND** sent to Bonnie Wertenberger (wertenbergerb@paec.org).

QUESTIONS? Contact **Bonnie Wertenberger**, Conference Partnership Chairman, by email at wertenbergerb@paec.org or by phone at 850-638-6131 (Ext) 2259.



Conference Partner Contract

Name of Company:

Company Address:

City:

State:

ZIP:

Billing Address (if different than above):

City:

State:

ZIP:

Name of Authorized Company Representative:

Title:

The conference partner assumes the entire responsibility and liability for losses, damages, and claims arising out of partner's activities on the hotel premises (Wyndham Bay Point - 4114 Jan Cooley Drive - Panama City Beach, Florida) and will indemnify, defend, and hold harmless the hotel, its owner, and its management company; PAEC; the FloridaLearns Foundation, Inc., as well as their respective agents, servants, and employees from any and all such losses, damages, and claims.

Authorized Company Representative: _____ Date: _____
(Signature)

Signed contract MUST be received prior to conference.

Please mail, fax, or email to:

Bonnie Wertenberger

FloridaLearns Foundation

P. O. Box 243

Chipley, FL 32428

wertenbergerb@paec.org - fax 850.638.6109