



SPONSORSHIP OPPORTUNITIES

Sponsoring Company _____

Contact Name _____ Title _____

Address _____

City _____ State _____ Zip _____

Preferred Phone _____ Office Cell Email _____

Brand to Recognize _____

Brand Contact Name _____ Title _____

Preferred Phone _____ Office Cell Email _____

Please select sponsorship:

- Monday Evening Reception - \$2,500
- Tuesday Evening Reception - \$2,500
- Golf Beverage Cart - \$1,500

To receive maximum exposure for your sponsorship contribution, please reply by Friday, January 31, 2020

Payment Information

- Enclosed check (*US Funds only*) payable to NFRA Please invoice me
- Charge my: Visa MasterCard Discover American Express

Card Number _____

Expiration Date _____ CVV _____

Name on Card _____

Signature _____

Please return this form with payment to:

National Frozen & Refrigerated Foods Association (NFRA)
4755 Linglestown Road, Suite 300 • Harrisburg, PA 17112
Email: nfra@nfraweb.org • Fax: (717) 657-9862 • Phone: (717) 657-8601