

AAST 2019 Prestige Partner Program Contract

COMPANY INFORMATION

Company Name (as it should appear in all printed pieces and on website)

Contact Name for Fulfillment

Title

Company Address

City

State

ZIP

Phone Number

Email Address

PARTNERSHIP LEVEL

Diamond \$15,000

Sapphire \$10,000

Ruby \$5,000

Emerald \$2,500

PAYMENT INFORMATION

Total Due \$ _____ (Full payment due with application)

Check Number _____ (Make check payable to AAST, include copy of contract with check)

Credit Card (Please do not provide credit card information on this contract. Upon receipt of this contract, AAST will email an invoice with credit card processing information.)

SIGNATURE AGREEMENT

All Prestige Partner Member benefits must be executed between January 1, 2019 and December 31, 2019. No benefits may be used outside these dates unless pre-approved by AAST. Prestige Partners may not cancel after acceptance by AAST except for breach of this agreement by AAST. No refunds will be given for Prestige Partner program participants.

Signature

Print Name

Company Name

Date

CONTACT INFORMATION

Send this form and payment to:

AAST
PO Box 775303
Chicago, IL 60677-5303

DIRECT QUESTIONS TO

Stuart Lawry
330 N. Wabash Ave., Suite 2000
Chicago, IL 60611
Phone: 312.673.5540 | Fax: 312.673.6802
Email: slawry@astweb.org

