



Sponsorship Form

**2021 APSA Annual Meeting
September 30 - October 3, 2021
Washington State Convention Center
Seattle, WA**

Sponsorships: Please check the box next to the sponsorships and sponsor benefits level you would like.

Premier (\$10,000)

- General Support Sponsorship
- Opening Reception
- Wi-fi
- Wellness Items

Please note: The availability of in-person reception sponsorships at the APSA Annual Meeting subject to the health and safety guidance from Seattle and the Centers for Disease Control, which the APSA continues to monitor.

Platinum (\$7,500)

- General Support Sponsorship
- Professional Headshot Station
- Lanyards
- Childcare

Gold (\$5,000)

- General Support Sponsorship
- Emerging Scholars Symposium
- Career Open House
- Interview Services
- New Member/First Time Attendee Breakfast
- TLC at APSA Breakfast
- TLC at APSA Luncheon
- Department Chairs' Workshop and Luncheon
- Graduate Student Happy Hour
- APSA Congressional Fellows Happy Hour
- International Attendee Reception
- Mentoring and Networking Reception
- Family Ice Cream Social

Silver (\$2,500)

- General Support Sponsorship
- Product Demonstration
- Charging Station
- Coffee Break

Bronze (\$1,000)

- General Support Sponsorship
- Best Poster Award
- Travel Grants

Generation to Generation Initiative: \$ _____

Sponsor Information

Company: _____

Address: _____

Phone: _____ Fax: _____

Website: _____

Contact Person: _____

Title: _____

Email: _____

Please return this completed form with payment to:

American Political Science Association
Attention: Development
1527 New Hampshire Ave, NW, Washington, DC 20036 Email:
development@apsanet.org

APSA will contact you and a contract will be issued. Sponsorships are not be guaranteed without a signed application, contract, and payment in full.

Deadline: The deadline for any artwork, logos, or listings to be included in the program is July 19, 2021.

Payment Method:

Check Enclosed (Payable to American Political Science Association)

Bank Transfer (Directions will be provided)

Visa MasterCard American Express

Total Amount of Payment: \$ _____

Credit Card #: _____

Expiration Date: _____

Name of Cardholder: _____

Amount of Payment: \$ _____

Cardholder's Signature: _____

Billing Address: _____

