

**Deadline for sponsor registration is midnight, August 7, 2018.**

## Registration of Sponsor Representatives

Each sponsorship includes complimentary registrations based on sponsorship level shown below.

**Diamond** - 8 registrations

**Platinum** - 4 registrations

**Gold** - 2 registrations

**Silver** - 1 registration

Registration for these individuals must be completed online at:

[www.appliedreprostrategies.com/registration.html](http://www.appliedreprostrategies.com/registration.html), follow "Sponsor Representative Registration" link.

Additional representatives beyond the sponsorship level should register and pay using the general registration process for conference attendees.

## Conference Location

Ruidoso Convention Center  
111 Sierra Blanca Drive  
Ruidoso, NM 88345 US

## Sponsor Questions

Craig Gifford  
New Mexico State University  
(575) 646-6482

## Return Completed Form and Payment by mail to:

Beef Reproduction Task Force  
c/o Natl Assn of Animal Breeders  
Attn: Donna Craig  
8413 Excelsior Drive, Suite 140  
Madison, WI 53717

## by email to:

Donna at  
[dcraig@naab-css.org](mailto:dcraig@naab-css.org)

## by fax to:

Attn: Donna Craig  
608-827-1535

## Meeting Website:

[www.appliedreprostrategies.com](http://www.appliedreprostrategies.com)

# Applied Reproductive Strategies in Beef Cattle

August 29-30, 2018 - Ruidoso, NM

## Sponsorship Form

### Billing Contact

Name

Company

Address

City

State

Zip

Phone

Email

Sponsor Website

### Display Needs

**Do you require electricity for your display?**

Yes

No

(Booth space includes one 6-foot table and chairs.)

Other display requests? (please describe)

### Sponsorship Level

*Diamond Sponsorship - \$5,000*

Includes registration for **eight** individuals

\$

*Platinum Sponsorship - \$2,500*

Includes registration for **four** individuals

\$

*Gold Sponsorship - \$1,000*

Includes registration for **two** individuals

\$

*Silver Sponsorship - \$500*

Includes registration for **one** individuals

\$

**TOTAL ---->** \$

### Payment Options

Check enclosed (payable to NAAB)

MasterCard

VISA

American Express

Card Number

CVV/Security Code

Expiration Date

Name on Card

Billing Address (city, ST, zip)

Authorized Signature