



## 2008 Joint Use & Pole Attachment Conference

Embassy Suites Hotel, Phoenix-Scottsdale • Phoenix, AZ

October 27-28, 2008

### Sponsorship Opportunities

#### **Overall Event Sponsorships:**

##### **Platinum Premier Event Sponsor - \$5,000**

- Pre-conference recognition as Platinum Premier Event Sponsor in all conference marketing
- 2 Conference Registrations
- On-site recognition via logo on all conference signage, listing in the conference materials
- Recognition from the podium during the welcoming and closing remarks
- One Registration Insert

#### **Individual Event Sponsorships:**

##### **Networking Reception (Exclusive Sponsorship) - \$3,500. Includes Signage, Registration insert, and one Conference Registration**

Monday, October 27<sup>th</sup>

##### **Networking Lunch (2 Available) - \$2,000 each/ both for \$3,000. Includes Signage, Registration insert, and one Conference Registration**

Monday, October 27<sup>th</sup>

Tuesday, October 28<sup>th</sup>

##### **Continental Breakfast (2 Available) - \$1,000 each/both for \$1,500. Includes Signage.**

Monday, October 27<sup>th</sup>

Tuesday, October 28<sup>th</sup>

##### **Networking Breaks (4 Available) - \$500 each/all 4 for \$1,500. Includes Signage.**

Monday, October 27<sup>th</sup> (a.m. Break)

Monday, October 27<sup>th</sup> (p.m. Break)

Tuesday, October 28<sup>th</sup> (a.m. Break)

Tuesday, October 28<sup>th</sup> (p.m. Break)

**2008 Joint Use & Pole Attachment Conference**  
**Page Two**

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**CONTACT INFORMATION**

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Zip/Postal Code: \_\_\_\_\_ Country: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

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**ORDER INFORMATION**

Sponsorship Selected: \_\_\_\_\_ Sponsorship Cost: \_\_\_\_\_

Enclosed is my company's check in the amount of \$ \_\_\_\_\_ made payable to Utilities Telecom Council (UTC).

Credit Card:          MasterCard          Visa          American Express

Name on Card: \_\_\_\_\_

Cardholder's Signature: \_\_\_\_\_

Credit Card #: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ Charge Amount: \_\_\_\_\_

Street Address: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**Please send completed form to:**

**Andy Browne, Meetings & Exhibits Manager**  
**1901 Pennsylvania Ave, NW • 5<sup>th</sup> Floor • Washington, DC 20006**  
**Phone/Fax: 202.833.6813 • [andy.browne@utc.org](mailto:andy.browne@utc.org)**