

**The Governor's 2011
COLORADO TOURISM CONFERENCE**
September 21 – 23, 2011
Embassy Suites
Loveland, CO

Sponsorship Agreement

Name: _____

Organization: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____ E-mail: _____

If your sponsorship is entitled to Complimentary Registrations, fill out individual registration sheets for each attendee and check the complimentary box on the registration form.

Sponsorship Amount: \$ _____ Sponsorship Opportunity Name: _____

Method of Payment: Check
 Charge to my Credit Card: \$ _____ Total Amount
 Visa MasterCard American Express
 Need invoice to mail in check

Card Number: _____ Expiration Date: _____

Signature: _____ Date: _____

For information on sponsorships, exhibitor space or the conference, please contact:

Kelly Barbello
Colorado Tourism Office
303.892.3887 phone
303.892.3848 fax
kelly.barbello@state.co.us