

**2008 MASFAP CORPORATE SUPPORT**

Institution Name: _____			
Address: _____	City _____	State _____	Zip _____
Contact Person: _____			
E-mail: _____	Phone: _____	Fax: _____	

**EXHIBIT OPPORTUNITIES**

*Spring 2008 Conference, Lake of the Ozarks*

- \$750 Exhibit Fee (This fee **does not** include registration)
  - Number of exhibit spaces needed: \_\_\_\_\_
- Spring 2008 Exhibit Total \$ \_\_\_\_\_**

*Fall 2008 Conference, Lake of the Ozarks*

- \$750 Exhibit Fee (This fee **does not** include registration)
  - Number of exhibit spaces needed: \_\_\_\_\_
- Fall 2008 Exhibit Total \$ \_\_\_\_\_**

**CORPORATE SUPPORT OPPORTUNITIES**

Please check the boxes below indicating selection of opportunities that you choose to participate in for both Spring and Fall MASFAP Conferences; recognition will be given per conference:

**--ADVERTISEMENT--**

- \$200.00 Advertisement in Spring Program (includes name and logo)
  - \$200.00 Advertisement in Fall Program (Includes name and logo)
- Advertisement Total \$ \_\_\_\_\_**

**--GENERAL SUPPORT/CONTRIBUTION--**

- \$ \_\_\_\_\_ - This allows you to make a contribution to the mission of MASFAP as an organization dedicated to servicing the interests and needs of students and financial aid professionals.

**Forms must be faxed or e-mailed no later than February 15th to:**

Ginny D'Angelo, Commerce Bank, MASFAP Corporate Support Chair  
314-514-6228 or E-mail [ginny.dangelo@commercebank.com](mailto:ginny.dangelo@commercebank.com).

**Payment is due by February 26th, 2008, payable to MASFAP. Send payments to:**

Amy Henson, Three Rivers Community College,  
2080 Three Rivers Blvd., Popular Bluff, MO. 63901

All exhibit information will be available on the MASFAP website 30 days prior to the conference,  
including shipping information.

**NOTE:** If paying for Spring 2008 Conference only, please copy this form for Fall, 2008 payment.  
Fall payment should be received by October 1, 2008. **Deadlines for reimbursement due to  
cancellation must be given no later than 30 days of conference for return of full payment.**

**FOR OFFICE USE ONLY**

Date Form Received \_\_\_\_\_

Exhibit: Spring Rec'd \_\_\_\_\_ Fall Rec'd \_\_\_\_\_

Program: Spring Rec'd \_\_\_\_\_ Fall Rec'd \_\_\_\_\_

Contributions: \$ \_\_\_\_\_ Total Commitment: \$ \_\_\_\_\_

