

Application for Exhibit Space

2025 Air Force Physician Assistant Readiness Course (AFPARC)
GUNTER HOTEL, SAN ANTONIO, TX
MEETING DATES: April 14-18, 2025 - EXHIBITOR DATES: April 15-17, 2025

EXHIBITOR: _____ (Legal name of organization)

ADDRESS: _____ CITY/STATE/ZIP: _____

Name & Title of Exhibitor Representative: _____

Contact Information for Exhibitor Representative: Email: _____

Phone: _____ Fax: _____

The Exhibitor sign(s) for the booth should read: _____

BY SIGNING THIS APPLICATION, EXHIBITOR AGREES TO ABIDE BY THE GENERAL RULES AND REGULATIONS INCLUDED WITH, AND MADE PART OF, THIS APPLICATION. ACCEPTANCE OF THIS APPLICATION BY THE SAFPA CONSTITUTES A BINDING CONTRACT. APPLICATIONS RECEIVED WITHOUT AN AUTHORIZED SIGNATURE AND FULL PAYMENT WILL NOT BE ACCEPTED OR PROCESSED.

Authorized Signature: _____

Sponsorship Opportunities

- Platinum Sponsor - \$10,000
- Diamond Sponsor - \$8,000
- Gold Sponsor - \$5,000
- Silver Sponsor - \$3,000
- Bronze Sponsor - \$2,000

Additional Sponsorship Opportunities

- 2' x 3' poster - \$500 each
#: _____ Total: _____
- 4' x 6' Banner - \$1,000 each
#: _____ Total: _____

The Application & Payment

Please complete, sign and return the completed application to safpaactivities@gmail.com. If paying by check, please coordinate through the email address as well. You may pay by credit card by completing the information below or by going to www.safpa.org and clicking on the vendor tab.

Credit Card Number: _____ Security Code: _____

Expiration Date: _____

Cardholder's Name: _____

Cardholder's Signature: _____

Billing Address: _____

City/State/Zip: _____