



# USA SECURITY AND DEFENSE PAVILION EUROSATORY 2020

## SPONSORSHIP CONTRACT

8 - 12 June 2020 | Paris Nord Villepinte | Paris, France

Gaye Hudson, Deputy Director,  
Sponsorship & International Programs  
ghudson@ausa.org | 703-907-2401

Fax: 703-243-2589  
2425 Wilson Blvd, Suite 530  
Arlington, VA 22201

### 1 COMPANY INFORMATION

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

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

City, State, Zip: \_\_\_\_\_

Website: \_\_\_\_\_

Contact: \_\_\_\_\_

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

Email: \_\_\_\_\_

### 2 SPONSORSHIP OPPORTUNITIES

- Official U.S. Exhibitor's Reception \$7,500 \$ \_\_\_\_\_
- U.S. Army Birthday Sponsorship \$5,000 \$ \_\_\_\_\_
- Outdoor Display Area
  - Exclusive Sponsorship: \$30,000 \$ \_\_\_\_\_
  - Four Star: \$20,000 \$ \_\_\_\_\_
  - Three Star: \$15,000 \$ \_\_\_\_\_
  - Two Star: \$10,000 \$ \_\_\_\_\_
  - One Star: \$5,000 \$ \_\_\_\_\_
- Speakers Corner Video Ad \$3,000 \$ \_\_\_\_\_
- Seamless Graphic Banner Ads Contact us \$ \_\_\_\_\_
- USA Security & Defense Pavilion Partner \$1,500 \$ \_\_\_\_\_

### SHOW GUIDE SPONSORSHIPS

- Back Cover Advertisement \$5,000 \$ \_\_\_\_\_
- Inside Front Cover Advertisement \$4,000 \$ \_\_\_\_\_
- Inside Back Cover Advertisement \$4,000 \$ \_\_\_\_\_
- Full-Page Advertisement \$3,000 \$ \_\_\_\_\_
- Front Cover Sponsorship \$2,500 \$ \_\_\_\_\_
- Page Runner Sponsorship \$2,500 \$ \_\_\_\_\_
- Premium Listing Sponsorship \$500 \$ \_\_\_\_\_

### 3 PAYMENT

Payment by credit card or check at the time of contract submission is preferred. Sponsorships may be invoiced and are payable within 30 days. If payment is not received, sponsor will forfeit their right to sponsor. All payments must be received prior to the event. Confirmation of sponsorships, along with any additional specifications, deadlines, etc., will be by email. Cancellation policy: no refunds.

**TOTAL: \$** \_\_\_\_\_

- Check: Please make payable to Association of the United States Army. Mail to address listed above.
- Credit Card
  - Visa
  - MasterCard
  - American Express

Card # \_\_\_\_\_

Exp. date \_\_\_\_\_ CSV code \_\_\_\_\_

Name on card \_\_\_\_\_

Authorized Signature \_\_\_\_\_

Billing Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

### 4 AUTHORIZATION

This contract must be submitted with authorizing signature, agreeing to abide by all terms, conditions, and specifications, and to the commitment total tallied above. Any questions regarding a specific opportunity in total tallied above. Any questions regarding a specific opportunity in advance of submission may be directed to AUSA, contact information above.

Sponsor's Authorized Signature \_\_\_\_\_ Date \_\_\_\_\_