

Com	pany				
Cont	act Name				
Addr	ess				
City ₋		State	Zip	Country	
Phon	ne	F	ax		
E-ma	ail			_	
□Sil [,] By	 Acknowledge Company nai 4 Complimen ver: \$2,500 Acknowledge Acknowledge Company nai 2 Complimen signing below, I acknowledge 		ttendee pre-me d on the ATA ev Registrations ing the virtual ev ttendee pre-me d on ATA event Registrations zed to sign for n	eting email ent website vent eting email website ny company and understan	
	mmitment to participat bmitting completed ag		Ridgway Traine	<u>es Conference</u> . Payment i	s due within 30 days of
Au	ithorized Signature:			Date:	
				org by <u>Monday, Novemb</u> e Format & @50-word co	er 1, 2021, along with the mpany description.
PAY	MENT INFORMATION	l:			
		k to ATA, 2000 Duke Stre	•	Association; if invoice is rec lexandria, VA 22314 (NOT	quired, please check here□ E: Check must be in

Once your signed form is received, we can follow up to provide an invoice with ACH transfer details

ACH Payment