

# Sponsor Registration and Payment



Northern Alberta Regional Council Member Meeting  
Thursday, March 21, 2019  
Holiday Inn Conference Centre, Edmonton South  
4485 Gateway Blvd., Edmonton AB T6H 5C3  
4:30 p.m.-7:30 p.m.

## SPONSORSHIP REGISTRATION AND PAYMENT

To participate as a sponsor, please complete this Sponsorship form. Please submit sponsorship requests by **Thursday, March 7, 2019**.

- Event Sponsor**  
**(Limited to three sponsors)**  
**Members: \$500 (plus tax)**  
**Non-members: \$600 (plus tax)**
- Sponsors will be introduced at the beginning of the meeting and throughout the presentation.
  - Sponsors will have the opportunity to be a featured speaker
  - Sponsors will be provided with a tabletop to display products and services.
  - Sponsors will have the opportunity to network with leaders of the security industry.
  - Sponsor's company logo will be posted on the web and featured in all event communication pieces as the event sponsor.

- Tabletop Sponsor**  
**(Limited to ten sponsors)**  
**Members: \$400 (plus tax)**  
**Non-members: \$500 (plus tax)**
- Sponsors will be introduced at the beginning of the meeting and throughout the presentation.
  - Sponsors will be provided with a tabletop to display products and services.
  - Sponsors will have the opportunity to network with leaders of the security industry.
  - Sponsor's company logo will be posted on the web and featured in all event communication pieces as a sponsor.

Please complete the following form and email to Rishad Alam by clicking on the "Submit" button at the bottom of the form or fax to (905) 513-0624.

Name: \_\_\_\_\_  I will be working at the booth

Company name: \_\_\_\_\_

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

City: \_\_\_\_\_ Province: \_\_\_\_\_

Postal code: \_\_\_\_\_ Tel: \_\_\_\_\_

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

Cheque (payable to "CANASA") mail to: \_\_\_\_\_  Visa  MasterCard  American Express  
50 Acadia Avenue, Suite 201, Markham ON L3R 0B3

Card number: \_\_\_\_\_ Expiry date: \_\_\_\_\_

Cardholder name (please print): \_\_\_\_\_

Signature: \_\_\_\_\_

**For more information:**  
Rishad Alam  
Meeting & Event Planner  
Tel: 1 (800) 538-9919 ext. 239  
Fax: (905) 513-0624  
Email: ralam@canasa.org

**By submitting this form electronically, you are authorizing the Canadian Security Association to charge your credit card for the amount indicated above.**