



**PDC- The Professional Development Consortium 2025 Summer Conference Sponsorship Commitment Form**

**Company Name as it should appear on conference material:** \_\_\_\_\_

**Primary Contact Name:** \_\_\_\_\_

**Title:** \_\_\_\_\_

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

**City/State/Zip Code:** \_\_\_\_\_

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

**E-Mail Address:** \_\_\_\_\_

\_\_\_\_\_

**Sponsorship Opportunity:** \_\_\_\_\_

**Amount of Sponsorship:** \_\_\_\_\_

**PAYMENT INFORMATION: Payment must be received in full prior to delivery of all benefits**

**Please invoice me at the above address**

**Please bill my credit card provided**

**American Express**

**Visa**

**Mastercard**

**Discover**

**Credit Card Number:** \_\_\_\_\_

**Expiration Date:** \_\_\_\_\_ **Security Code:** \_\_\_\_\_

**Name on card:** \_\_\_\_\_

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

Please note that a 3% charge will be added to credit card payments.