2021 CONVENTION SPONSOR APPLICATION

Company Name (as you would like it listed):

Mailing Address:

Website Address:

Contact Name:

Contact Email:

Contact Phone:

# Signature:

**Payment Information**

# Sponsorship Packages

* Platinum (Level 1) $10,000+

□ Gold (Level 2) $5,000-$9,999

□ Silver (Level 3) $1,000-$4,999

□ Bronze (Level 4) $500-$999

* **My check made payable to BVA National Convention is enclosed.**

**Mail your check to BVA National Convention**, 1101 King St Suite 300, Alexandria, VA 22314

* **Charge my credit card:** ☐ AMEX ☐ MasterCard ☐ VISA

Card Number:

Expiration Date: CVV2

Amount Authorized: $ \_

Name on Card (please print): \_

Signature: \_

Billing Address (if different):

Total Amount Payable To: Blinded Veterans Association, 1101 King St Suite 300, Alexandria, VA 22314 Accounts Payable, [ap@bva.org](mailto:ap@bva.org)