



Midwest Chapter Sponsor Registration Form

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

Contact Name: \_\_\_\_\_ Title: \_\_\_\_\_

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

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

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

Preferred Sponsor Onsite Location:

- checkbox Louisville, KY checkbox Chicago, IL checkbox St. Louis, MO checkbox Cincinnati, OH

Select Sponsorship Level:

- checkbox Premier Site Sponsor
checkbox Lunch Sponsor | \$1000
checkbox Breakfast Sponsor | \$700
checkbox Speaker Sponsor | \$500
checkbox Break Sponsor | \$250

General Sponsorship not specific to location:

- checkbox Supporting Sponsor | \$150

Payment

checkbox We are an ALCA Corporate and have applied the 15 % discount to total below.

checkbox I will pay by check Total Amount Enclosed: \$ \_\_\_\_\_

checkbox I will pay by card checkbox VS checkbox MC checkbox AX Total amount authorized: \$ \_\_\_\_\_

CC # \_\_\_\_\_ Exp date (MM/YY): \_\_\_\_\_ CVV: \_\_\_\_\_

Name on card: \_\_\_\_\_ Signature: \_\_\_\_\_

EMAIL, MAIL, OR FAX TO: ALCA Midwest Chapter to aschachter@aginglifecare.org
3275 W. Ina Road, Suite 130 | Tucson, AZ 85741 | P 520.881.8008 | F 520.325.7925

REFUND POLICY: No refunds will be issued after July 15, 2026. Cancellations before that date will receive a refund minus a \$50 administrative fee. Substitutions are welcome. Changes or Cancellations must be made in writing to the ALCA office.