



2025 Annual Sponsorship/Opportunity Application

Application due: **November 15th 2024**

Organization Name: _____

Contact Person Name: _____

Email: _____

Phone: _____

Sponsorship Level: Annual Sponsor - Platinum (\$1400) _____
 Annual Sponsor - Gold (\$1000) _____
 Annual Sponsor - Silver (\$700) _____
 Private Practice Sponsor Tier 2 (\$500) _____
 Private Practice Sponsor Tier 1 (\$300) _____

Other Opportunities: Sponsor a Meal at an event _____

Payment can be made by check. Please send this form by email to the treasurer, Crystal Hartranft at Crystalhartranft@gmail.com. If you need to make alternative payment arrangement, please coordinate with Crystal or mail a check to:

Crystal Hartranft, Treasurer of Milwaukee iaedp
10936 N. Port Washington Rd
Mequon WI, 53092, Suite 141