



**Iowa Association of Health Underwriters
Sponsor Registration and Agreement
2022 Annual Symposium**

Sponsor Information

Company Name	
Contact Name & Title	
Address, City, State & Zip Code	
Contact Phone	
Contact Email	
Attendee/Rep Name & Title	
Attendee/Rep Phone	
Attendee/Rep Email	

Sponsor Commitment Level

- Platinum
 Gold
 Silver
 Bronze
 Contact me to discuss other opportunities

Payment

To pay by check, please return this form with a check payable to IAHU to:

IAHU
PO Box 71005
2135 NW 108th St
Clive, IA 50325

To pay by credit card, please complete the Sponsor Registration form on our website:

<https://www.eiahu.org/> Programs and Events → Upcoming Event Registration

Agreement

We agree to abide by all rules and regulations governing the Symposium. Acceptance of this form by the Iowa Association of Health Underwriters constitutes a binding agreement between the parties.

Authorized By (Print Name)	
Signature	
Date	

Questions? Contact IAHU Corporate Sponsor Chair
 Casandra Mueller
cmueller@baseonline.com
 P: 888-386-9680 x235