



56th INTERNATIONAL SNOWMOBILE CONGRESS
 Radisson Hotel and Conference Center Green Bay
 2040 Airport Dr, Green Bay, WI 54313
 June 13-15, 2024
 SPONSORSHIP REGISTRATION FORM



Contact: _____ Title: _____
 Organization/Business: _____
 Address: _____
 City: _____ State/Province: _____ Zip/Postal Code: _____
 Email: _____
 Phone: _____ Cell: _____
 Website/Facebook Page (Select one) _____

Representative attending (one form per person) Name: _____
 Email: _____ Phone: _____
 Representative attending (one form per person) Name: _____
 Email: _____ Phone: _____
 Representative attending (one form per person) Name: _____
 Email: _____ Phone: _____
 Representative attending (one form per person) Name: _____
 Email: _____ Phone: _____
 Representative attending (one form per person) Name: _____
 Email: _____ Phone: _____

REGISTRATION FEES – Include: Full Congress Registration Includes: Wednesday welcome reception breakfast on Thursday, Friday and Saturday, all breaks, Thursday off-site event, Friday groomer reception, Saturday evening awards banquet, all educational breakout sessions.

SPONSORSHIP LEVEL –

List correct number of complimentary ISC Registrations on this form-All others use ISC Registration Form

- Platinum Level – 5 Complimentary ISC Registrations (submit one form for each) \$10,000
 - Inside Exhibit Outside Exhibit
- Gold Level – 4 Complimentary ISC Registrations (submit one form for each) \$5,000-\$9,999
 - Inside Exhibit Outside Exhibit
- Silver Level – 3 Complimentary ISC Registrations (submit one form for each)..... \$2,500-\$4,999
- Bronze Level – 2 Complimentary ISC Registrations (submit one form for each) \$1,000-\$2,499
- County Alliance/Council/Club/Other Organizations – 1 Complimentary ISC Registration \$500
- Credit Card Service Fee \$10.00 – (Approximately 3.75%) \$ _____

TOTAL REGISTRATION FEES (U.S. Dollars) \$ _____

METHOD OF PAYMENT

Check: Payable to: AWSC ISC 2024 Visa Mastercard Discover
 Print Name (as it appears on card): _____
 Billing Address (if different than above): _____
 Card # _____ Exp Date _____ / _____ CVV#: _____
 Signature _____

Mail Registration/Payment to:

ISC 2024
 c/o AWSC
 529 Trail Side Dr., Suite 200
 DeForest, WI 53532

Or Email: stormyh@awsc.org

Questions? Contact us: Melissa Rhodes / melissakrhodes@gmail.com / 715-459-8001