

Sponsor/Exhibitor Form



I want to help uniformed service and military personnel struggling with substance abuse and mental illness and wish to support The Rosecrance Florian Symposium in the following category: (Please check appropriate box and fill out form.)

\$10,000 and up (Gold) \$5,000-\$9,999 (Silver) \$2,500-\$4,999 (Bronze) \$350 (Exhibitor)

Pay by Check (make checks payable to: Rosecrance Inc.)

Send completed form and check to: Annette Bowden
Rosecrance Health Network
1021 N Mulford Rd, Rockford, IL 61107

Pay by Credit Card VISA/Mastercard/Discover (please circle one)

Amount to be charged _____

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Recognition/Acknowledgement

Name as you wish it to appear in the program

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Address

City

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Phone

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Please fill out attendee registration details on back

Thank you for your generosity!

If you would like more information, please contact
Lisa Primm at 815.529.3907 or lprimm@rosecrance.org

In partnership with the
Alamo Area F.O.O.L.S.,
Rosecrance will host the
symposium at the Holiday
Inn San Antonio Riverwalk
in San Antonio, Texas on
October 28-29, 2019.



Registration Information

Please provide the names of those that will be attending/exhibiting (Gold Sponsors receive 5 registrations, Silver Sponsor receive 3 registrations, Bronze Sponsor receive 2 registrations, Exhibitors receive 1 registration)

1. Name _____ Email _____

2. Name _____ Email _____

3. Name _____ Email _____

4. Name _____ Email _____

5. Name _____ Email _____

Please return completed form to: Annette Bowden: abowden@rosecrance.org
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