2023 INSTITUTE SPONSORSHIPS

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Reach landmen, attorneys, geologists, geophysicists
and engineers by sponsoring an AAPL Institute!

Sponsorships include perks such as company recognition in email marketing, company logo on presentation materials and on-site publications as well as opportunities to distribute promotional materials to attendees.

INSTITUTE SPONSOR

Sposorship includes:

- · Premier company recognition through email marketing
- · On-site signage for the duration of the event
- · Company recognition during on-site PowerPoint slideshow
- · Opportunity to distribute company promotional materials throughout event

LUNCHEON SPONSOR

Sposorship includes:

- · Company recognition through email marketing
- On-site signage during luncheon
- Company recognition during on-site PowerPoint slideshow
- · Opportunity to distribute company promotional materials throughout luncheon

HAPPY HOUR SPONSOR

Sposorship includes:

- · Company recognition through email marketing
- · Company recognition during on-site PowerPoint slideshow
- · Opportunity to distribute company promotional materials throughout happy hour

EDUCATION SUPPORTER SPONSOR

Sposorship includes:

· Company recognition on signage at event

For more information contact:

Michelle Bateman

mbateman@landman.org | (817) 231-4550

PRICE: \$750

PRICE: \$500

PRICE: \$250

PRICE: \$1,000



2023 INSTITUTE SPONSORSHIP AGREEMENT

(Company name printed above si	•		ar in AAPL listings)
*Please submit a copy of your con Only vector files in .ai or .eps form		@landman.org;	
Offig vector files in .aror.eps for th	at wiii be accepted.		
CONTACT INFORMATION (Pr	imary contact for corresp	oondence)	
Contact Name:			
Contact Title:			
Address:			
City, State, Zip:			
Email: Phone:			ə:
SPONSORSHIP INFORMATIO	N		
			Amount: \$
			//////////////////////////////////////
PAYMENT INFORMATION			
Sponsorship(s) Total: \$			
Prior Payments/Credits: \$			
BALANCE DUE: \$			
Billing Preference: Pay in fu	ıll with credit card		
	for full amount (will be se	ent to contact listed abov	re)
IIIVOICE	or rail arribant (will be se	THE COUNTRICE HISTORIA ABOV	9
Visa Mastercard	American Express	Check#	
			 Expiration Date:
Cardholder Name:			
Billing Address:			
City, State, Zip:			
Cardholder Signature:			
Credit card payment: Complete t Check payment: Complete the po			
ATTENTION: If are you sub	mitting a logo, please fill i	n the line below with the	URL address you would like linked.