



**Iowa Association of Health Underwriters
Sponsor Registration and Agreement
2023 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
 6919 Vista Drive
 West Des Moines, IA 50266

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

<https://www.eiahu.org/> Sponsors → Become a Sponsor

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
casandra@khisolutions.com