

# Better Together 2021

HASC Virtual Annual Meeting  
April 29 – 30



## SPONSOR REGISTRATION FORM

Email form to: Leticia Salcido, HASC  
Questions? Email: [lsalcido@hasc.org](mailto:lsalcido@hasc.org) or call (213) 538-0737

### COMPLIMENTARY REGISTRATIONS PER SPONSOR LEVEL

DIAMOND: 8 PLATINUM: 4 GOLD: 2 CONTRIBUTOR: 2

Organization: \_\_\_\_\_ Sponsor Level \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip \_\_\_\_\_

### COMPLIMENTARY FULL-CONFERENCE REGISTRATIONS

Sponsors will receive a specified number of registrations on a complimentary basis. Please list your complimentary registrants here. Registrants must be employees of the same sponsoring organization.

1. First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Title: \_\_\_\_\_ Phone: \_\_\_\_\_ Email (required) \_\_\_\_\_

2. First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Title: \_\_\_\_\_ Phone: \_\_\_\_\_ Email (required) \_\_\_\_\_

3. First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Title: \_\_\_\_\_ Phone: \_\_\_\_\_ Email (required) \_\_\_\_\_

4. First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Title: \_\_\_\_\_ Phone: \_\_\_\_\_ Email (required) \_\_\_\_\_

5. First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Title: \_\_\_\_\_ Phone: \_\_\_\_\_ Email (required) \_\_\_\_\_

6. First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Title: \_\_\_\_\_ Phone: \_\_\_\_\_ Email (required) \_\_\_\_\_

7. First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Title: \_\_\_\_\_ Phone: \_\_\_\_\_ Email (required) \_\_\_\_\_

8. First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Title: \_\_\_\_\_ Phone: \_\_\_\_\_ Email (required) \_\_\_\_\_