



# 2025 Department of the Air Force Modeling & Simulation Summit Sponsorship Agreement

Rosen Centre, Orlando, FL  
6 – 9 May, 2025



2101 Wilson Boulevard, Suite 700, Arlington, VA 22201-3060 • NTSA.org

## Organization Information

Company			Contact		
Title			On-site Summit Contact(s)		
Address			Address 2		
City	State	Zip	Country	Phone	
Fax	Cell Phone		E-mail		

## Sponsorship Terms and Agreements

Terms and conditions of Agreement between two parties, National Training & Simulation Association (NTSA) on behalf of the DAFMSS are as follows:

Sponsor understands that NTSA, its members or affiliates are not endorsing products or services of Sponsor. All advertising and publicity materials developed by Sponsor, reflecting sponsorship of DAFMSS, must be expressly approved in writing by NTSA. Sponsor agrees to indemnify NTSA from any and all costs, liabilities, losses or expenses that NTSA may result of Sponsor's advertising, activities, or material provided in connection with the sponsored activity.

In the event of any breach of this agreement by NTSA, Sponsor shall be entitled to no special, incidental, indirect, consequential, punitive, or similar damages or lost profits. NTSA maximum liability to Sponsor for any reason and for any claim asserted under any circumstances related to this sponsorship agreement shall be strictly limited to NTSA refunding the sponsorship fee.

NTSA owns all rights to NTSA and all its program aspects. Sponsor shall have the right to use NTSA trademarks or logos for the limited purpose of advertising and promoting the sponsored activity, subject to NTSA prior written approval of such use.

The Parties agree to maintain in confidence the terms and conditions of this Agreement, except insofar as any proposed disclosure of these terms is approved by the other Party in advance, or is limited to NTSA leadership on a need to know basis.

This Agreement does not constitute or create a partnership, joint venture, or agency relationship between NTSA, DAFMSS and Sponsor. This Agreement may not be assigned by either party without the express written consent of the other party.

By entering into this Agreement, signatory certifies that he/she is authorized to sign on behalf of Sponsor, and to bind Sponsor to the terms and conditions herein stated. This Agreement is not binding until signed by both parties, an authorized representative from NTSA and Sponsor, and NTSA has received full payment.

**Sponsorship of this event does not constitute an endorsement by the DoD**

### PAYMENT OPTIONS

NDIA/NTSA charges a non-refundable 2.5% Administration and Technology fee on all credit card transactions. To avoid fees, you may pay for your registration with the no-cost payment option of eCheck. Virginia is controlling law for all transactions.

eCheck    Account Holder's Name \_\_\_\_\_

Bank Name \_\_\_\_\_

Routing # \_\_\_\_\_ Account # \_\_\_\_\_ Total \_\_\_\_\_

### Cancellation

Please understand that NTSA is relying on your agreement as a sponsor of DAFMSS and that benefits begin upon ratification of agreement.

## Sponsorships Opportunities

- Opening Reception ..... \$10,000 (2 sponsors)
- Registration ..... \$10,000 (Exclusive)
- WiFi ..... \$10,000 (Daily, Exclusive)
- Beverage Breaks ..... \$3,000 per break
- Pad and Paper\* ..... \$2,500 (Exclusive)
- Meeting Bag\* ..... \$3,000 (Exclusive)
- Lanyards\* ..... \$3,000 (Exclusive)

Total Amount: \$ \_\_\_\_\_

\*Production is not included in price. Sponsor can supply product or have NTSA have them produced for an additional cost. Pre-approval of design and sponsor logo is required.

**Logo specifications** – Please e-mail a full color, 300 dpi or better image, preferably in EPS format, TIF and JPG logos will be accepted if an EPS is unavailable.

## Submit contract & Payment via email:

NTSA Sponsorships - DAFMSS 2025, 2101 Wilson Blvd Ste 700  
Arlington, VA 22201

**Shannon Burch, CEM**, Senior Director of Exhibits & Sponsorships,  
sburch@NTSA.org, (703) 247-9473

**Holly Gallier**, Operations Coordinator, hgallier@NTSA.org, (703) 247-2569

VISA	MasterCard	American Express
Name on the Credit Card _____		
Credit Card Number _____		
Exp. Date (Month/Year) _____		CVV _____
Signature _____		Date _____

Authorized Signature:

Print Name:

Date: