



LUGPA 2027 Urology Resident Job Fair

COMPANY DETAILS

Company Name _____

Address _____

City _____ State _____ Zip _____ Country _____

MEETING CONTACT

(Main Contact)

Name _____

Title _____

Email _____

Phone _____

SPONSORSHIP SELECTION – LUGPA 2027 Urology Resident Job Fair

- Job Fair Table - \$3,000

ADDITIONAL JOB FAIR VISIBILITY (Optional)

- Practice video advertisement (submitted by you)
 Practice Showcase

PAYMENT (LUGPA TIN 26-2943240)

- Will pay by check; please invoice me.
Please make checks payable to: LUGPA, 875 N. Michigan Ave, Suite 3100, Chicago, IL 60611
- Credit Card (American Express, Discover, MasterCard, Visa)
Credit Card Number _____
CVV _____ Expiration Date _____
Name on card _____

NOTES for LUGPA _____

AGREEMENT & AUTHORIZATION

SIGNATURE

DATE

Once completed, please email this form to Kelsey at kbrooks@lugpa.org