



CO-SPONSOR REQUEST FORM

NYSASIC FALL 2019 CONFERENCE

October 2-4, 2019

Holiday Inn, Saratoga Springs NY

NYSASIC values the generosity of the companies that support our conferences. We are asking for companies to co-sponsor the upcoming NYSASIC conference events, either by contributing directly to an event or by placing an advertisement in the program booklet. Each Co-sponsor will receive a link from the NYSASIC website following the conference and will be acknowledged in the conference program booklet.

CO-SPONSOR SPECIFIC EVENTS

NYSASIC will accept co-sponsorships at the following levels (check desired level):

_____ **\$2,000 GOLD Level Co-Sponsor**

The GOLD level co-sponsor will help NYSASIC defray the costs of events such as the evening networking receptions or special activities.

_____ **\$1,000 SILVER Level Co-Sponsor**

The SILVER level co-sponsor will help NYSASIC defray the costs of events such as the Thursday after-noon break or special activities.

_____ **\$500 BRONZE Level Co-Sponsor**

The BRONZE level co-sponsor will help NYSASIC defray the costs of events such as the after-noon break or special activities.

The above Co-Sponsors will be listed as such on a sign board that will be present at all NYSASIC events during the conference. The Co-Sponsor may coordinate with the NYSASIC President to plan the food choices for a particular event sponsored.

PROGRAM BOOKLET ADVERTISEMENT

NYSASIC will accept booklet advertisements in the following amounts (check desired size/amount):

_____ **\$400 – ½ page ad approximately 4”(w) x 3”(h)**

_____ **\$800 – full page ad approximately 4”(w) x 6”(h)**

_____ **\$1,000 – back page ad approximately 4”(w) x 6”(h)** (only 1, sold to first full payment received)

The co-sponsor MUST submit the information for the program booklet formatted as a **.JPG file** via email to Robert Chetney, NYSASIC President at Robert.Chetney@OswegoCounty.com.

Company Name (as it should be listed in program): _____

Address: _____

Contact Name: _____ **Contact Phone:** _____

Contact Email: _____ **Company www. link** _____

All checks returned for non-sufficient funds will be assessed a \$25 bank fee and payment must then be made with certified funds. Co-Sponsor forms received after **September 11, 2019**, may not be listed in the Program Booklet.

Complete form and pay by credit card online at www.nysasic.org
or mail check payable to “NYSASIC” and completed form via USPS to:

Amy Clute, NYSASIC Treasurer

Warren County Self-Insurance, 1340 State Route 9, Lake George, NY 12845 (p)518-761-6529, clutea@warrencountyny.gov