

2017 NYSAEYC Annual Conference Application

www.nysaeyc.org/annual-conference-3

Company _____
 Contact Person _____ Email _____
 Title _____
 Mailing Address _____
 City _____ State _____ Zip _____
 Telephone (work) _____ (cell) _____
 Representative(s) Attending _____ Email(s) _____

Sponsor Packages

- Platinum \$8,000
 Gold \$5,000
 Silver \$3,000
 Bronze \$2,000

We are happy to accommodate additional and/or customized sponsorship opportunities upon request.

Exhibit Packages

Commercial Exhibitors

- Interior Booth \$550
 Additional Interiors +\$500
 Corner Booth \$650
 Additional Corner +\$625

Non-Profit Exhibitors

- Interior Booth \$175
 Additional Booth +\$175
 (Booth placement will be assigned)

Register after February 10, add \$50.

Print Advertising

	Full Page	1/2 Page	1/4 Page	1/8 Page
Final Conf Program	<input type="checkbox"/> \$450	<input type="checkbox"/> \$350	<input type="checkbox"/> \$250	<input type="checkbox"/> \$150
Pre-Conf Reporter	<input type="checkbox"/> \$225	<input type="checkbox"/> \$150	<input type="checkbox"/> \$100	<input type="checkbox"/> \$75
Champions Program	<input type="checkbox"/> \$150	<input type="checkbox"/> \$75	n/a	n/a

Online registration and interactive exhibit floor plan is now available on our website. Please visit www.nysaeyc.org, and go to Annual Conference under Professional Development. Commercial exhibitors, if unable to register online, select booth preference below.

First Choice Booth _____ Third Choice Booth _____

Second Choice Booth _____ Fourth Choice Booth _____

Booth location will be indicated in your registration confirmation.

(See important dates for sponsoring, advertising and exhibiting on page 5)

Signature of person making reservation _____ Date _____

Total Amount Enclosed \$ _____ (please make checks payable to: NYSAEYC)

Credit Card MasterCard VISA Cardholder Name _____

Account # _____ CVV# _____ Exp. Date _____ Billing Zip _____

Cardholder Signature _____

ALL EXHIBITORS, PLEASE READ AND SIGN THE FOLLOWING AGREEMENT.

I understand that submission of this application and contract for Exhibit Space constitutes agreement to abide by NYSAEYC's exhibit policies and information (printed on reverse of this page). Payment in full is required at time of application. Funds are to be made payable to NYSAEYC. There will be a \$25 processing charge for returned checks. After March 17, 2017 only MasterCard, Visa, or Money Orders will be accepted. NO REFUNDS WILL BE MADE AFTER February 17, 2017. Cancellations prior to February 17, 2017 will incur a \$25 processing charge. Telephone cancellations not accepted. Notify Aimee Pryba in writing prior to February 17, 2017 at apryba@nysaeyc.org.

Signature _____ Date _____