

NEW YORK STATE BAR ASSOCIATION

SPONSOR/EXHIBITOR REGISTRATION

Name of main contact _____

Name(s) and city of on-site representative(s) for name badge:

Firm/Company _____
as it is to appear on the program and any signage

Address _____

City _____ State _____ Zip _____

Phone _____

Email _____

SPONSORSHIP OPPORTUNITIES

Exhibitor fees are not included with sponsorship.
Please see below for exhibitor fees.

Thursday, October 20, Sponsorship Opportunities

- ☐ Host general session refreshment break (with food) @ \$3,500
- ☐ Host general session mid-afternoon refreshment break @ ~~\$1,500~~
- ☐ Host audio visual equipment for general session @ \$2,500
- ☐ Host wireless internet for general session @ \$1,000
- ☐ Host reception (food & beverages) @ \$4,500
- ☐ Host wine during dinner @ \$2,500

Friday, October 21, Sponsorship Opportunities

- ☐ Host general session continental breakfast @ \$4,000
- ☐ Host general session mid-morning refreshment break @ ~~\$1,500~~
- ☐ Host audio visual equipment for general session @ \$2,500
- ☐ Host wireless internet for general session @ \$1,000
- ☐ Host lunch @ \$5,000
- ☐ Host general session mid-afternoon refreshment break @ \$1,500

☐ **Exhibitor without Speaking Opportunity** Fee: \$1,500

Includes a draped table, two chairs and one complimentary registration to the social events. Additional representatives must pay the guest fee to attend the social events.

☐ **Exhibitor with Speaking Opportunity** Fee: \$2,000

Includes all of the above plus an opportunity to formally address all attorneys. Electrical hook-ups, DID lines, internet access and audio visual requirements must be arranged with The Logan *at the exhibitor's expense*. Please contact **khamling@crystalgolfresort.com** with email subject line **"Exhibitor AV/Electrical Requirements"** to arrange for electrical, internet and AV.

Elder Law and Special Needs Section

Fall Meeting

October 20-21, 2016

**Grand Cascades
Hamburg, NJ**

Sponsorship Program Information:

Please email your logo in a high definition tif or jpg file for inclusion in the program. We cannot include any logo in word format. You should send your logo directly to Cathy Teeter at cteeter@nysba.org. Your firm's logo will be included in the official program brochure posted on the Section's website and distributed at the meeting.

PAYMENT INFORMATION

Check or money order enclosed in the amount of \$ _____

(Please make checks payable to the **New York State Bar Association**.)

Charge \$ _____ to ☐ Visa
☐ American Express ☐ Discover
☐ MasterCard

Card number: _____

Expiration Date: _____

Authorized Signature: _____

All payments and logos must be received no later than October 4, 2016 for inclusion in the **final program**.

Send payment to:

Cathy Teeter
Meetings Representative
New York State Bar Association
One Elk Street
Albany, NY 12207
Fax: 518-463-5993

For add'l information contact:
Cathy Teeter - cteeter@nysba.org

