



SCHOOL OF BUSINESS

STATE UNIVERSITY OF NEW YORK AT NEW PALTZ

For more information please contact:
Lori Nutting
Phone: 845-257-2932
Email: nuttingl@newpaltz.edu
or visit our website at
www.newpaltz.edu/schoolofbusiness

Business/Sponsor Name: _____

Contact Name: _____

Address: _____

City/State/Zip: _____

Email: _____

Phone: _____

Sponsorship Opportunities for the School of Business 2017 Hall of Fame

Gold Sponsor \$3,000

(\$2,000 is tax deductible)

- Two reserved tables of 10 (20 tickets)
- Full page acknowledgement in the program
- Company executive introduced at dais
- Sponsor status on invitation
- Included on "Investing in the School of Business" wall in van den Berg Hall
- Designated as a sponsor in press release and website with link to company page

Silver Sponsor \$1,000

(\$500 is tax deductible)

- One reserved table of 10 (10 tickets)
- Half page acknowledgement in the program
- Recognition during ceremony
- Sponsor status on invitation
- Included on "Investing in the School of Business" wall in van den Berg Hall
- Designated as a sponsor in press release and website with link to company page

Bronze Sponsor \$500

(\$400 is tax deductible)

- Two tickets
- Half page acknowledgement in the program
- Recognition during ceremony
- Designated as a sponsor in press release and website with link to company page

Journal Acknowledgement Form

You may also place an acknowledgement in our Journal.

Below are the acknowledgement sizes and prices. (Please note that all sponsorships include an acknowledgement.)

____ Full Page	____ Half Page
Area 6½ (W) x 9 (H)	Area 6½ (W) x 4½ (H)
\$500	\$250
____ Quarter Page	
Area 3½ (W) x 4½ (H)	
\$100	

Finished program is 8 ½ (W) X 11 (H). Please email your copy, preferably as a high resolution PDF file to nuttingl@newpaltz.edu, or mail copy to:
SUNY New Paltz Foundation Office, 1 Hawk Drive, New Paltz, NY, 12561-2443.

Payment Information

- Enclosed is my check payable to **SUNY New Paltz Foundation**
 Charge my VISA MasterCard Discover American Express

Credit Card #:

Expiration Date:

Security Code:

Cardholder Name (Please Print):

Cardholder Signature:

This card is a Personal Card Business Card

**Sponsorships received by March 1, 2017 will be recognized on the invitations.
Payment and camera-ready copy must be received by March 15, 2017 for inclusion in the Journal.**

Please mail this completed form to: SUNY New Paltz Foundation, 1 Hawk Drive, New Paltz, NY 12561

A copy of the latest annual report for the SUNY New Paltz Foundation may be obtained, upon request, by contacting the SUNY New Paltz Foundation - HAB 501, 1 Hawk Dr, New Paltz, NY 12561 or from the New York State Attorney General's Charities Bureau, Attn: FOIL Officer, 120 Broadway, New York, New York 10271. (17SOBHOF AHIST 0203401)