

Business Plan Contest Sponsor Form

Sponsorships will provide scholarships to the student participants and cover the operating costs of the Business Plan Contest.

Company: _____ **Contact Name:** _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Phone Number: _____ **E-mail Address:** _____

Please check the amount you would like to donate or designate an amount in the space provided.

_____ **Presenting Sponsor** **\$3,000**

- All of the benefits of the Corporate Sponsor
- Company executive introduced at dais
- Company banner displayed at the Ceremony

_____ **Corporate Sponsor** **\$1,500**

- All of the benefits of the Business Sponsor
- Designated as a sponsor on the invitations

_____ **Business Sponsor** **\$1,000**

- All of the benefits of the Company Sponsor
- Designated as a sponsor in the press release
- Included on the "Investing in the School of Business" wall in van den Berg Hall

_____ **Company Sponsor** **\$500**

- Recognition during the ceremony

_____ **Other amount, please specify** \$ _____

Enclosed is my check payable to *SUNY New Paltz Foundation/School of Business*.

Charge my **Visa** **MasterCard** **Discover** **American Express**

Credit card #: _____ Exp. Date: _____

Cardholder signature: _____ Security Code: _____

(AmEx: 4 digits on front of card,

Cardholder name (please print): _____ Visa/MC/Discover: last 3 digits on back)

This card is a Personal card Business card

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

For additional information, please contact Danielle Semenchuk, by phone at (845) 257-2932 or by email at semenchd@newpaltz.edu.

1112BPC

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.