



# SCHOOL OF BUSINESS

STATE UNIVERSITY OF NEW YORK AT NEW PALTZ

For more information please contact:  
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or visit our website at  
[www.newpaltz.edu/schoolofbusiness](http://www.newpaltz.edu/schoolofbusiness)

Business/Sponsor Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

## Sponsorship Opportunities for the School of Business Hall of Fame, April 24, 2019

**Gold Sponsor \$3,000**

(\$1,000 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
- Designated as a sponsor in press release and website with link to company page

**Silver Sponsor \$1,500**

(\$500 is tax deductible)

- One reserved table of 10 (10 tickets)
- Half page acknowledgement in the program
- Recognition during ceremony
- Sponsor status on invitation
- Designated as a sponsor in press release and website with link to company page

**Bronze Sponsor \$500**

(\$300 is tax deductible)

- Two tickets
- Qtr 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  
Area 6½ (W) x 9 (H)  
\$500

\_\_\_ Half Page  
Area 6½ (W) x 4½ (H)  
\$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](mailto: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 #:

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Expiration Date:

Security Code:

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Cardholder Name (Please Print):

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Cardholder Signature:

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This card is a  Personal Card  Business Card

**Sponsorships received by March 1, 2019 will be recognized on the invitations.**

**Payment and camera-ready copy must be received by March 15, 2019 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. (19SOBHOF AHIST 0203401)