



# 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 22, 2020

**Gold Sponsor \$3,000**

(\$1700 is tax deductible)

- Two reserved tables of 10 (20 tickets)
- Full page (5"x8") 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**

(\$850 is tax deductible)

- One reserved table of 10 (10 tickets)
- Half page (5"x3.875") 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**

(\$370 is tax deductible)

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

## Sponsorship Opportunities for the School of Business Hall of Fame 2020

Deadline to be included on the event website and advertising materials is March 1, 2020

A copy of our most recently filed financial report is available from the Charities Registry on the New York State Attorney General's website ([www.charitiesnys.com](http://www.charitiesnys.com)) or, upon request, by contacting the New York State Attorney General, Charities Bureau, 28 Liberty Street, New York, NY 10005, or us at 1 Hawk Dr, New Paltz, NY 12561. You also may obtain information on charitable organizations from the New York State Office of the Attorney General at [www.charitiesnys.com](http://www.charitiesnys.com) or (212) 416-8401.

### Office Use Only Section

**Designation Code:**

Hall of Fame

**Solicitation Code:**

20SOBHOF AHIST 0203401

**Method of payment:**

**Payment:** Please send with donation to **SUNY New Paltz Foundation, 1 Hawk Dr., New Paltz, NY 12561-2443**

Please make checks payable to **SUNY New Paltz Foundation**  Visa  Mastercard  American Express  Discover

Cardholder Signature: \_\_\_\_\_

Name as it appears on card: \_\_\_\_\_

Cardholder Name: \_\_\_\_\_ This card is a  Business Card  Personal Card

Card #: \_\_\_\_\_ Exp. Date \_\_\_\_\_ Security Code \_\_\_\_\_

**(AmEx: 4 digits on front of card, Visa/MasterCard/Discover: last 3 digits on back)**