



# Sponsorship Letter of Agreement

Event	Date(s)	Location	Today's Date
Event Coordinator		Agreement <input checked="" type="checkbox"/> Sponsorship Agreement	

<input type="checkbox"/> <b>Patron Level (\$500 to \$999)</b> <ul style="list-style-type: none"> <li>■ Logo on all promo material for event in secondary position, to include mailings and email blasts</li> <li>■ Logo on event web site page in a secondary position with direct link to your web site for 30 days after the program.</li> <li>■ Five minute verbal overview of your services, prior to the presentation, on the day of the event. (<i>Monthly programs only</i>)</li> <li>■ Table in back of event for distribution of marketing materials.</li> <li>■ Two (2) complimentary tickets to event</li> </ul>	<input type="checkbox"/> <b>Contributor Level (\$1,000 or more)</b> <ul style="list-style-type: none"> <li>■ Logo on all promo material in highlighted position, to include program, mailings and email blasts (company info with link on email blast)</li> <li>■ Logo on cnyshrm.org home page in secondary position with direct link to your web site for 6 months after the program</li> <li>■ Logo and description on event web site page in a secondary position with direct link to your web site; brief description of services/products to be included; content created by cnyshrm.org webmaster</li> <li>■ Company promo material distributed at event; material to be provided by sponsor</li> <li>■ Recognition of sponsorship at both the opening and closing remarks session</li> <li>■ Recognition as sponsorship organization when scholarships are awarded.</li> <li>■ Two (2) complimentary tickets to event</li> </ul>
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In addition to the aforementioned items, your sponsorship dollars will also be donated in your organization's name to replenish our scholarship fund.

The product, service or event must be of potential interest and benefit to our members in their roles as human resource professionals. The request for sponsorships must be in writing, and approved by the Events Committee. Questionable or precedent-setting situations may need to be resolved by the Board of Directors. This request must be accompanied by a description and sample of the marketing materials that will be available for distribution at the program.

*Payment must be made prior to the event and included with this returned signed agreement. Payment is non-refundable. Checks should be made payable to CNY SHRM and sent to P.O. Box 5216; Syracuse, NY 13220.*

**Agreement:** I agree to the above indicated statement(s). I understand that the event coordinator or designee, at their sole discretion, may enact changes to this agreement without prior notification. In providing the above service(s), or in promoting any product or service I waive all responsibility from CNY SHRM, its representatives and members, and conference participants and accept full responsibility of all actions upon myself and the organization I represent. Furthermore, I understand this agreement is binding to those who may represent my organization or myself at the event.

Signature	Today's Date
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Please fax your completed form to Attn.: JoAnn Juno at (315) 251-1848 or mail to:

SHRM-CNY Events Committee  
P.O. Box 5216  
Syracuse, NY 13220

You can also contact JoAnn directly with any questions by calling (315) 251-1458.