



The Catholic School Administrators Conference  
2010 Annual, The Marriott, Wolf Road, Albany, NY

October 31, 2010

Sponsor Registration Form

Company Name \_\_\_\_\_

1st Rep. \_\_\_\_\_ Title \_\_\_\_\_

2nd Rep. \_\_\_\_\_ Title \_\_\_\_\_

Address/City/St/Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_

*(Please complete and select your choice of meals on the back)*

**Sponsorship Opportunities**

(Additional tables available at \$50.00 per table).

\_\_\_\_\_ -**Dinner Sponsor** - Amount \$1,500.00 - *includes one 6ft display table, company flyer to be included in attendee folder, dinner and breakfast for two representatives and a special thank you at dinner and in the program.*

\_\_\_\_\_ -**Speaker Sponsor** - Amount \$1,000.00 - description - *includes an attractive table sign on speaker table, one 6ft display table, company flyer to be included in attendee folder, dinner and breakfast for two representatives and a special thank you.*

\_\_\_\_\_ -**Breakfast Sponsor** - Amount \$1,000.00 - *includes an attractive table sign on breakfast buffet table, one 6ft display table, company flyer to be included in attendee folder, dinner and breakfast for two representatives and a special thank you in program.*

\_\_\_\_\_ -**Administrators Gift** - Amount \$1,000.00 - *includes an attractive table sign on the registration table, one 6ft display table, company flyer to be included in attendee folder, dinner and breakfast for two representatives and a special thank you in the program.*

\_\_\_\_\_ -**Program Printing Sponsor** - Amount \$800.00 - *includes one 6ft display table, company flyer to be included in attendee folder, dinner and breakfast for two representatives and a special thank you in the program.*

\_\_\_\_\_ -**Reception Sponsor** - Amount \$800.00 - *includes an attractive table sign on reception table, one 6ft display table, company flyer to be included in attendee folder, dinner and breakfast for two representatives and a special thank you in the program.*

\_\_\_\_\_ -**Door Prize Sponsor** - Amount \$800.00 - *includes an attractive table sign on prize table, one 6ft display table, company flyer to be included in attendee folder, dinner and breakfast for two representatives and a special thank you in the program.*

\_\_\_\_\_ -**Gold Sponsorship** - Amount \$600.00 - *includes one 6ft display table, company flyer to be included in attendee folder, dinner and breakfast for two representatives and a special thank you in the program.*

\_\_\_\_\_ - **SILVER SPONSORSHIP** - Amount \$300.00 - *includes company flyer in attendee booklet and a special thank you in the program.*

SPONSORSHIP AMOUNT \_\_\_\_\_ = \_\_\_\_\_

ADDITIONAL TABLES \_\_\_\_\_ X \$50.00 \_\_\_\_\_ = \_\_\_\_\_

ADDITIONAL REPS. (2 included in sponsorship fee) \_\_\_\_\_ X \$50.00 \_\_\_\_\_ = \_\_\_\_\_

TOTAL SPONSORSHIP AMOUNT ENCLOSED: \_\_\_\_\_ = \_\_\_\_\_

**Conference Details:**

The Conference will begin Sunday, October 31, 2010 - Sponsors are allowed to begin setting-up at 11:00am, registration begins at 2:00pm with the opening session starting at 3:00pm.

**Marketing Promotional Information**

Please include a description of the products and services offered by your firm. Limit message to 30 words; longer messages will be edited. This information may be re-printed for the conference folders and may be read during the Conference. If you want to have a flyer included in the attendee folder please send 450 8 1/2 x 11" flyers to: 525 4th Avenue, Troy, NY 12182 postmarked before October 15, 2010.

**Payment: Make checks payable to CSAANYS**

**Sponsorship Terms and Conditions**

1. A deposit equal to 50% of 1st sponsorship choice is required to hold reservation, remaining balance due by October 15, 2010.
2. Unless otherwise agreed, CSAANYS is responsible for the planning and administration of the sponsored event. NYSCIRS may entertain specific requests by a Sponsor concerning sponsorship, but reserves the right to make the final decision to accommodate such requests.
3. Sponsorships must be paid in full by October 15, 2010.

**Return this Form and Payment to (checks should be made out to CSAANYS):**

CSAANYS

525 4th Avenue, Troy, NY 12182

PH: 518-273-1205; FAX: 518-273-1206; E-mail: [nysadm@nycap.rr.com](mailto:nysadm@nycap.rr.com)

**MEAL CHOICES**

**Contact Person #1 \_\_\_\_\_ Contact Person #1 \_\_\_\_\_**

- \_\_\_ Chicken Mediterranean
- \_\_\_ Filet Mignon
- \_\_\_ Sole Chardonnay
- \_\_\_ Pasta Primavera

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**Monday's Breakfast Buffet? \_\_\_\_\_**

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**You are welcome to include more representatives (the first two are included in the sponsorship fee) for an extra \$50.00 per person.**

**Please specify their name and meal choice below. Thank you.**

Name:	Meal:
Name:	Meal:
Name:	Meal:
Name:	Meal: