



New York State Adult Day Services Association Inc.

2017 Annual Conference Partnership Opportunities with NYSADSA

October 24-26, 2017

Holiday Inn Express & Suites

400 Old Loudon Road, Latham, NY 12110

The New York State Adult Day Services Association (NYSADSA) cordially invites your company to partner with us to help forward our collective missions, and increase awareness of your company and its services/products to Adult Day Services providers across the entire Empire State.

Conference Attendance: 75–100

Exhibit Hours: Wednesday, October 25, 2017 9:00 a.m. – 4:00 p.m.

Thursday, October 26, 2017 8:00 a.m. – 12:00 p.m.

PARTNERSHIP OPPORTUNITIES

We offer the following opportunities to be visible at this event:

Exhibit/Sponsor	Price
Exhibit Booth	\$350
Lunch Sponsor	\$650
Dinner Sponsor	\$850
Conference Sponsor	\$1,500
Conference Program	
Conference Program	Price
Back Cover Ad (7 ½ x 9 ¼")	\$400
Inside Cover Ad (7 ½ x 9 ¼")	\$300
Full Page Ad (7 ½ x 9 ¼")	\$200
Half Page Ad (7 ½ x 4 ½")	\$100
Quarter Page Ad (3 ½ x 4 ½")	\$50
Business Card Ad (3 ½" x 2 ¼")	\$25

All ads are in color
 Artwork should be minimum 300 dpi and sent to nysadsa@caphill.com as a jpg or pdf.
 Annual Conference program deadline is Friday, October 6, 2017

Exhibit Booth:

- Exhibit Opportunities include:*
- Booth (6' skirted table)
 - Program and Web Listing
 - 1 Lunch each day (Wednesday & Thursday)

Lunch Sponsor:

- Lunch Sponsorship includes:*
- Booth (6' skirted table)
 - Program and Web Listing
 - Lunch Intro/Comment Time
 - ½ page Ad
 - 2 Lunches each day (Wednesday & Thursday)

Dinner Sponsor:

- Dinner Sponsorship includes:*
- Booth (6' skirted table)
 - Program and Web Listing
 - Dinner Intro/Comment Time
 - ½ page Ad
 - 2 Lunches (each day) & 2 Dinners (1 Day)

Conference Sponsor:

- Conference Sponsorship includes:*
- Booth (6' skirted table)
 - Full Page Ad
 - Program and Web Listing
 - Intro/Comment Time
 - Literature Handout
 - 2 Lunches (each day) & 2 Dinners (1 Day)

For more information, contact:

NYSADSA Administrator - Victoria Palasieski

(518) 694-5366

nysadsa@caphill.com



NYSADSA 2017 Annual Conference

Professional Partner Registration Form/Contract

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Please complete this form and submit with payment to address listed below. Please send any artwork electronically to the NYSADSA Office at nysadsa@caphill.com. Please keep a copy of this contract for your records. We will confirm all arrangements with you upon receipt of paperwork.

Company/Program Name: _____

Contact Name: _____

Address: _____

City: _____ State/Province: _____ Zip: _____

E-Mail: _____ Phone: _____

Exhibit/Sponsorship Opportunities

____ Conference Sponsor - \$1,500.00

____ Dinner Sponsor - \$750.00

____ Lunch Sponsor - \$500.00

____ Exhibit Booth - \$250.00

Conference Program Opportunities

____ Back Cover Ad - \$400.00

____ Inside Cover Ad - \$300.00

____ Full Page Ad - \$200.00

____ Half Page Ad - \$100.00

____ Quarter Page Ad - \$50.00

____ Business Card Ad - \$25.00

Additional Company Meal Tickets

Lunch (Wednesday & Thursday): Total # _____ x \$60.00 = \$ _____

Dinner (Wednesday): Total # _____ x \$45.00 = \$ _____

Total Enclosed: \$ _____

____ Check Enclosed (Please make payable to: NYSADSA)

____ Credit Card

Type of Card: __ Visa __ MasterCard __ Amex __ Discover

Name on Card: _____

Card Number: _____

Expiration Date: _____ Security #: _____

Company Name: _____

Company Representatives Attending

Please indicate who will be representing your company at the Conference. You may add other names from the time of registration right through to the conference—just contact NYSADSA.

Please check your sponsorship level which indicates which meals are provided by NYSADSA for your representatives. Additional individual conference meal tickets can also be purchased.

Name(s)

Representative 1: _____ x Included _____

Representative 2: _____ x Included _____

Additional Company Representatives/Attendees

Name(s)	Lunch	Dinner
Representative 3: _____	_____	_____
Representative 4: _____	_____	_____
Representative 5: _____	_____	_____
Representative 6: _____	_____	_____
Representative 7: _____	_____	_____
Representative 8: _____	_____	_____

<p align="center">Questions?</p> <p>Please contact the NYSADSA office at: 518-694-5366 nysadsa@caphill.com</p>	<p align="center">Submit this form to: Email to: nysadsa@caphill.com Fax to: (518) 463-8656 or Mail to: NYSADSA 2017 Conference 230 Washington Avenue Extension, Suite 101 Albany, NY 12203</p>
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