



Joint NEWEA/NYWEA Spring Technical Conference & Exhibition Sponsorship Form June 5–8, 2016



Every five years, NEWEA and NYWEA team up together to hold an expanded Spring Meeting. We invite you to become a sponsor of this unique event! Please select from the items below. For more information, contact the NEWEA office at mail@newea.org or call (781) 939-0908.

Sponsorship Level Options	Joint Spring Technical Conference – Mystic, CT – June 5–8, 2016
<ul style="list-style-type: none"> <input checked="" type="radio"/> Flagship* \$2,500 <small>SELECT 7</small> <input type="radio"/> Bow \$1,700 <small>SELECT 6</small> <input type="radio"/> Aft \$1,000 <small>SELECT 4</small> <input type="radio"/> Port \$750 <small>SELECT 3</small> <input type="radio"/> Starboard \$500 <small>SELECT 2</small> <hr/> <p><input checked="" type="radio"/> = RESERVED FOR FLAGSHIP SPONSORS</p>	<ul style="list-style-type: none"> <input checked="" type="radio"/> Opening Session Breakfast <i>(Thank you, Connecticut Water Pollution Abatement Association!)</i> <input type="radio"/> Exhibit Hall Coffee Breaks <input type="radio"/> Operations Challenge <input type="radio"/> Presidents Reception <input type="radio"/> SSSSS Reception (Monday) <input type="radio"/> Web Presence Sponsorship Page <input type="radio"/> Mobile App Banner <input type="radio"/> Tuesday Night Mystic Aquarium Reception <input type="radio"/> Technical Tour <input type="radio"/> Student Public Outreach Event
<p>*The elite Flagship Sponsor level includes prominent recognition. Your company name and logo will be promoted verbally and visually during the Opening Session of the Spring Meeting, as well as printed in the on-site program.</p> <p>Including Opening Session, select six other items to sponsor.</p>	

SPONSORSHIP APPLICATION *Return by May 20, 2016 via email (mail@newea.org) or Fax (781-939-0907).*

Company Name _____

Contact Person _____ Date _____

Address _____ E-Mail _____

City _____ State _____ Zip _____ Telephone _____

Company website _____

Sponsorship Level: Flagship-\$2,500 Bow-\$1,700 Aft-\$1,000 Port-\$750 Starboard-\$500 **TOTAL \$** _____

Payment:

Check (Please make payable to NEWEA) Check # _____

Credit Card

MC VISA AMEX Card Number _____ Exp. Date _____ Sec. Code _____

Print Name _____ Authorized Signature _____

Please make checks payable to: **NEWEA**, mail to NEWEA, 10 Tower Office Park, Suite 601, Woburn, MA 01801



NEWEA
WORKING FOR WATER QUALITY

ADVERTISING OPPORTUNITIES

During the 2016 Joint NEWEA/NYWEA Spring Technical Conference and Exhibition, take advantage of the opportunity to advertise and promote your company.

The Marriott, Mystic, CT, June 5–8, 2016

Programs will be distributed to all 2016 Spring Meeting attendees.



2016 Joint NEWEA/NYWEA Spring Technical Conference and Exhibition Program Advertising Order Form

(Advertisers received by May 15, 2016 will receive special recognition during meeting.)

PROGRAM ADVERTISING RATES

COLOR ADS

___ Full Page (7.5" x 10")	\$450
___ Half Page (7.5" x 4.875")	\$350
___ Quarter Page (3.625" x 4.875")	\$125
___ Back Cover	\$1,000
___ Inside Front Cover	\$800
___ Inside Front, Right Page	\$700
___ Inside Front, Left Page (opposite Table of Contents) . . .	\$800
___ Inside Back Cover	\$600
___ Inside Back, Left Page	\$500
___ Inside Back, Right Page	\$500

Please attach your advertisement and return by mail, email (mgk@nywea.org) or fax (315-422-3851) no later than 5/15/2016. Please submit both ad copy and electronic file.

Contact Maureen Kozol at 315-422-7811, x3 or mgk@nywea.org with any questions.

Media: E-mail

File Formats: Mac preferred – Tiff (300 dpi high resolution), PDF, InDesign. All screen and printer fonts must be provided. Images must be 300 dpi at final size.

Hard Copy: Laser prints, business cards



PLEASE FILL OUT THE INFORMATION THAT APPLIES:

The undersigned hereby agrees to take _____ (specify size) Page Ad and pay the sum of \$ _____ (payment due with advertising copy).

Payment Options Check # _____ Credit Card MC VISA AMEX

Card Number _____ Exp. Date _____ V-Code _____

Signature _____

Company _____

Contact Person _____

Address _____ E-Mail _____

City _____ State _____ Zip _____ Telephone _____

Date _____ Authorized Signature _____

**Special recognition will be made to these program advertisers throughout the meeting.*

Please make checks payable to: NYWEA, Inc., mail to NYWEA, Inc., 525 Plum Street, Suite 102, Syracuse, New York 13204