



New Jersey Chapter of IFMA Sponsorship Form

Chapter Sponsorship per 12 month period

Gold Level Sponsor - \$5000	\$ _____
Silver Level Sponsor - \$3000	\$ _____
Bronze Level Sponsor - \$1000	\$ _____
Media Sponsorship - \$500	\$ _____
Meeting Sponsorship - \$250	\$ _____

TOTAL \$ _____

Payment options:

Process online at: <http://www.cvent.com/d/rcq8r0/4W>

By Mail:

Please mail the sponsorship form with payment to:

NJIFMA
C/O Hunterdon Facility Planners
10 Johnson Drive
Raritan, NJ 08869

By Fax:

Please fax sponsorship form and credit card information to:

908-393-9985

Authorizing Person's Name _____

Company _____

Address _____

E-mail _____

Phone _____ Fax _____

Web address _____

Credit Card Type ___ AmEx ___ Visa ___ MC # _____

Exp. Date _____

Name on Card _____

Signature _____

If you have questions, please contact:

Jackie Lewis- Sponsorship Chair –
Jackie@millicare-nj.com – 201-835-0624

or

Caroline Shelly, Chapter Administrator
Cshelly@njifma.com - 908-393-9984