



NAIFA-Broward

A Professional Association of Insurance and Financial Advisors

Sponsorship Agreement 2023 Annual

Company Name: _____

Contact Person: _____ Email: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____ Cell: _____

DISCOUNT FOR NAIFA MEMBERS THAT PURCHASE A SPONSORSHIP OF 10%

I/We have read and understand the Sponsor Options below and have checked all that apply:

- Gold \$400.00**-can be billed Jan/June \$200
 - Two minutes to speak at One Live Meeting
 - **Recognition** at every meeting during membership year
 - Logo with link listed on meeting notifications and our web pages
 - Space at resource table at the meeting
 - Membership pricing for events and programs
 - Opportunity to market to our mailing list and highlight your company

- Platinum \$700.00** -can be billed Jan/June \$350
- All benefits of Gold Plus:
- Two minutes to speak at **all meetings**
 - **Handouts at member seats/tables at the meeting**
 - First choice of sponsorship for upcoming special events
 - List of attendees with contact info after the event

- Honorable mention Individual Meeting **Sponsorship \$100**
 - Logo with link listed on this meeting notifications
 - Your company information featured at the event sponsored

GET INVOLVED! Join a committee, or better yet join the Board! We are always looking for assistance on areas like Membership, Sponsors, Programs, Political Action and so on.

Gold/Platinum Sponsor are responsible for supplying logo and preferred hyperlink which will be displayed in all of our email blasts and signage for meetings.

We extend to our sponsors the following additional opportunities:

- Present a Florida Department of Insurance approved 2 hour intermediate CE
- Submit an article for consideration in the E-Courier
- Arrive earlier to address those attending the CE class, and then again address those attending our Program
- Present a sales Idea; bring a door prize
- Members may also become more engaged at a committee or leadership level

Form of Payment Enclosed: Check (payable to NAIFA-Broward) Visa Mastercard American Express Discover Amount: \$_____

Name (as it appears on check or credit card) Credit Card Number CSC Code Expiration Date

Billing Address: Same as above

Address City State Zip

Signature Date

**Sponsorship agreements may be completed and paid by check or with a credit card at www.naifa-broward.org
(954) 753-2262 • Facsimile (866) 813-6695 • rhonda@naifa-broward.org
Post Office Box 770821 • Coral Springs, Florida 33077-0821**