



# NYSAPCSO ANNUAL CONFERENCE VENDOR/SPONSOR REGISTRATION FORM

## VENDOR INFORMATION:

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

Attendees Name(s) & Job titles: \_\_\_\_\_

*Write name and title as you want it to be displayed on name badge.*

Address: \_\_\_\_\_

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

Web Site Address: \_\_\_\_\_

Nature of Business: \_\_\_\_\_

### **Set-up (complete the following information regarding your set-up requirements):**

- 1 Table Included  Access to electric outlet  Tablecloth/linen needed
- # of Chairs \_\_\_\_\_  Extension cord needed

### **VENDOR ATTENDANCE REGISTRATION FEE: \$550.00 / person**

*\*\*\*Included in cost: vendor table, listing in program, all meals (including special events), snacks at breaks and parking\*\*\**

#### **Monday Night Semi-Formal Dinner (City Center)**

**Select one of the meal options below as well as specify any known food allergies:**

|                       |            |                               |                                  |                                     |
|-----------------------|------------|-------------------------------|----------------------------------|-------------------------------------|
| Name of Attendee # 1: | Allergies: | <input type="checkbox"/> Beef | <input type="checkbox"/> Chicken | <input type="checkbox"/> Vegetarian |
| Name of Attendee # 2: | Allergies: | <input type="checkbox"/> Beef | <input type="checkbox"/> Chicken | <input type="checkbox"/> Vegetarian |
| Name of Attendee # 3: | Allergies: | <input type="checkbox"/> Beef | <input type="checkbox"/> Chicken | <input type="checkbox"/> Vegetarian |
| Name of Attendee # 4: | Allergies: | <input type="checkbox"/> Beef | <input type="checkbox"/> Chicken | <input type="checkbox"/> Vegetarian |

### **SPONSORSHIP OPTIONS: \*\*\*Please select one of the following options to enhance your exposure\*\*\***

- \_\_\_\_\_ \$500 Bronze Sponsor  
(Vendor table, listing in program, 2024 sponsor listing on NYSAPCSO website)
- \_\_\_\_\_ \$750 Silver Sponsor  
(Vendor table, listing in program, business card size ad, 2024 sponsor listing on NYSAPCSO website)
- \_\_\_\_\_ \$1000 Gold Sponsor  
(Vendor table, listing in program, half-page ad (4¼ x 5½), 2024 sponsor listing on NYSAPCSO website)
- \_\_\_\_\_ \$2000 Platinum Sponsor  
(Vendor table, listing in program, full-page ad (8½ x 5½), 2024 sponsor listing on NYSAPCSO website)
- \_\_\_\_\_ Diamond Sponsor – The Top Financial Sponsor Above Platinum Level  
(Vendor table, listing in program, full-page ad on program back cover (8½ x 5½), 2024 sponsor listing on NYSAPCSO website)

*\*Non-Attendance: For vendors not planning to attend the conference in-person but want to place an ad in the program. Please submit your payment based on the sponsorship options above.*

**SPONSORSHIP ADS:** Please submit camera-ready artwork in **PDF format**, preferably in black and white, no later than **May 1, 2023** to: Kim Godreau at [kim.godreau@franklincountyny.gov](mailto:kim.godreau@franklincountyny.gov); phone: 518-481-1675.

**PRIZE DONATION:** Vendors and Sponsors are asked consider providing a prize for the drawing held on Tuesday afternoon. Please indicate prize to be donated, (*if known*): \_\_\_\_\_

**HOTEL RESERVATION/VENDOR REGISTRATION:**

- Step 1:** Complete one (1) Vendor/Sponsor Registration Form  
Make checks payable to: NYS Association of Personnel & Civil Service Officers  
Mail checks and completed registration forms to:  
Kim Godreau, Franklin County Personnel Officer (NYSAPCSO Secretary)  
355 West Main Street, Suite 311  
Malone, NY 12953
- Step 2:** Make your hotel reservation by clicking on the link provided. Hotel cost per night is \$169.99. Hotel reservations must be secured prior to **May 3, 2024**. ([Saratoga Hilton Room Reservation Link](#))
- Step 3:** When making your hotel reservation, the credit card used to reserve the room will not be charged until you check-in at the hotel. At the time of check-in, you are required to produce the credit card you want your stay charged to. If you do not physically have the card or are unable to bring the card, a Credit Card Authorization Form **MUST** be completed in advance and provided at check-in. The Hotel Tax Exempt Form **MUST** also be provided at the time of check-in. Click on the links to access the forms: [Credit Card Authorization Form](#) / [Hotel Tax Exempt Form](#)