



SOCIETY FOR HOSPITALITY AND FOODSERVICE MANAGEMENT

2017 HOLIDAY PARTY SPONSORSHIP CONTRACT

TUESDAY, DECEMBER 5, 2017 | 5:30 - 8:00 P.M. | NEW YORK, NY

Company Name (as it should appear in print) _____

Key Contact Name _____ Title _____

Address _____

City _____ State/Province _____ Zip _____

Phone _____ Cell (optional) _____

Email _____

SPONSORSHIP LEVEL

\$1,000

INCLUDES:

- Shared sponsorship opportunity
• Recognition in post-event Food & Hospitality At Work, promotional materials and on SHFM's website
• Your company logo on event signage
• 1 complimentary registration
• Recognition from podium
• Post-event attendee list
• Tabletop exhibit during networking breaks
• Opportunity to serve product

PAYMENT INFORMATION

My check payable to SHFM is enclosed

Mail Payment to:

Society for Hospitality and Foodservice Management (SHFM)
326 E. Main Street
Louisville, KY 40202

Charge my credit card: AMEX Discover Mastercard Visa

Card Number _____ Expiration Date _____

Signature _____

All sponsors/exhibitors must be a current Associate Member or join SHFM to participate.

I am a current member of SHFM I am not a current member of SHFM
Associate Membership - \$595 (1 year)

CANCELLATION POLICY - No cancellation or refunds once the sponsorship has been acknowledged by SHFM headquarters. Sponsor/exhibitor must pay in full by November 27, 2017. If full payment is not received by this date, the sponsor/exhibitor will receive final communication.

QUESTIONS

Contact Michelle Romero, Director of Marketing & Sponsorship Sales | mromero@hqtrs.com, 502.574.9036