



# 2017 SYMPOSIUM SPONSOR REGISTRATION



(PLEASE PRINT ALL INFORMATION)

### SPONSORSHIP LEVEL: (Please Select One)

- SYMPOSIUM SUPPORTER (\$100.00)**  
Sponsor's Name/Company appears in Symposium program materials.
- SYMPOSIUM SPONSOR (\$250.00)**  
Sponsor's Name/Company appears in Symposium program materials, appears on our web site for Six (6) Months & receives One (1) Symposium Ticket
- SYMPOSIUM EXHIBITOR (\$500.00)**  
Sponsor's Name/Company appears in Symposium program materials, appears on our web site for One (1) Year, receives Two (1) Symposium Ticket, and is provided with one Exhibitor table at the Symposium.

### SPONSOR INFORMATION:

FIRST NAME	LAST NAME	
BUSINESS / TRADE NAME		
MAILING ADDRESS		
CITY	STATE	ZIP CODE
BUSINESS CONTACT NUMBER	OTHER CONTACT NUMBER	
E-MAIL ADDRESS	BUSINESS WEB SITE ADDRESS	
DESCRIBE BUSINESS TYPE		

**TOTAL AMOUNT SUBMITTED:** \$ \_\_\_\_\_ by:  CHECK  MONEY ORDER  CREDIT CARD (Below)  
 Make Checks or Money Orders Payable To: "ASIS NNJ CHAPTER XIII"

E-Mail this form to: [Secretary@asisnj.org](mailto:Secretary@asisnj.org) =or= Fax to: 1 (973) 625-4104 no later than **March 1, 2017**

**WE ACCEPT:** **CREDIT CARD TYPE: (Check One):**  VISA  MASTERCARD  AMERICAN EXPRESS

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### AUTHORIZATION:

By my signature below, I agree to sponsor ASIS® Northern New Jersey Chapter XII's Annual Security Symposium for 2017. I attest that I am the duly authorized representative of the company seeking to sponsor this event and hereby authorize ASIS® Northern New Jersey Chapter XIII to use the corporate name & logo for sponsorship purposes of this symposium and do further agree to pay in full, the total amount submitted for said sponsorship. If payment has made by credit card, I hereby authorize ASIS® Northern New Jersey Chapter XIII to charge the card listed on this form for the total amount listed above.

<b>For Chapter Use Only</b>	
Transaction No.#	By / Date

\_\_\_\_\_  
*Signature of Authorizing Sponsor* *Date*