



Sponsorship Opportunities 2015 - 2016

Yes, we would like to participate! Please register us for the Following:

- * Option 1 Premium package that includes all line items identified (\$990.00) \$ _____
- Option 2 We would like to design our own sponsor package for \$ _____
- Option 3 We are only interested in one event/activity at this time for \$ _____

121st Annual Dinner \$275

November 19, 2015 **(Deadline) November 12, 2015**
*Includes firm name for all email blasts
 six weeks before event
 Prominent listing on entry board at event
 Prominent listing on program
 Honorable mention during President's address*

Annual Shrimp Dinner/Annual Meeting \$225

May 18, 2016 **(Deadline) May 11, 2016**
*Includes firm name for all email blasts six weeks
 before event
 Prominent listing on entry board to event
 Verbal recognition at event
 ICBA BRIEFS after event*

7th Annual Barristers Night \$150

March 24, 2016 **(Deadline) March 17, 2016**
*Includes firm name for all email blasts three
 weeks before event
 Prominent listing on entry board to event
 Listing in program
 Listing in BRIEFS after event*

5th Annual Meet the Judges Reception \$225

January 7, 2016 **(Deadline) December 31, 2015**
*Includes firm name for all email blasts
 six weeks before event
 Prominent listing on entry board to event
 Signage - ICBA BRIEFS after event*

Bench Bar Conference \$225

February 20, 2016, **(Deadline) February 12, 2016**
*Includes firm name for all email blasts four
 weeks before event
 Prominent listing on entry board
 to event - Prominent listing on program
 Honorable mention during President's address –
 Vender display tables*

**Deadline for Premium Sponsorship is
November 12, 2015**

***Option 1 receive a 10% discount**

Name of Contracting Representative

Company Name (please print EXACTLY how you want your company name to appear)

Address

City State Zip

Phone Fax

Email Address _____

Check enclosed, payable to ICBA Paying by credit card (complete information below)

TOTAL CHARGE: \$ _____ / **ICBA does not accept American Express/Discover.**

Visa Master Card _____
Credit Card number Exp. Date

Billing Address Zip

Authorized Signature Date

Please complete this form and return to: ICBA, PO Box 66, Grand Ledge, MI 48837

Phone: (517) 627-3938 Fax: (517) 627-3950 Email: info@inghambar.org

Updated 10-6-15 vls