



NY Statewide Payroll Conference Association

PO Box 1624
Fairport, NY 14450

"Don't Gamble with Payroll"

September 26-27, 2019

Del Lago Casino and Resort

1133 NY-414, Waterloo, NY 13165

Please reserve your exhibit space by providing your business information on the attached Exhibit Space Request Form. We are requesting that all registration forms and fees be submitted on or before June 1, 2019. Please note that exhibit space is limited, so your expeditious response is recommended.

Thank you for your courtesy and consideration in this regard. Please do not hesitate to contact the undersigned with any questions or comments you may have. We look forward to your participation.

Exhibit and Sponsorship Coordinators:

Jim Pfeiffer, email: jim@optimalpayrollsolutions.com phone: 518-383-1411

Dawn Helm, email: Dawn.Helm@cdphp.com phone: 518-641-5627

New York Statewide Annual Payroll Conference 2019

"Don't Gamble with Payroll"

Thursday, September 26, 2019

10:30 - 11:45 Registration/Vendor Hall
11:45 - 1:30 Lunch & Learn
1:45 - 2:45 Session 1
2:45 - 3:00 Break
3:00 - 4:00 Session 2
4:15 - 5:15 Session 3
5:15 - 5:45 Networking/Vendor Hall - Cash bar/Appetizers
5:45 - 7:30 Dinner/Learn
7:30 - ??

Friday, September 27, 2019

7:00 – 7:45 Breakfast
7:45 - 9:15 Legislative update
9:15 - 9:30 Break
9:30 - 10:30 Session 4
10:30 - 10:45 Photo Op
10:45- 11:15 Vendor Hall & Networking Opportunity
11:15 - 12:45 Lunch & Learn
12:45 - 1:45 Session 5
1:45 - 2:00 Break
2:00 - 2:45 Wrap- Up / Door Prizes (Must be Present to Win)

Deliver Materials to the venue no more than 3 days prior to the event (no sooner than 9/23/19) Please make note on the shipment ***"NYS Payroll Conference, 9/26-27 Attention Vendor Name"*** to ensure correct hold placement. Send to the hotel's Sales and Marketing Department.

A limited number of single and double occupancy rooms have been reserved at a rate of \$129/night for NY Statewide Payroll Conference of the American Payroll Association at the Del Lago Casino and Resort, 1133 NY-414, Waterloo, NY 13165.

Exhibit Space and Sponsorship Request Form

Game Changer (\$2500): (Only one opportunity per conference) Presentation of a Keynote including 5 minutes to speak about company product(s) during each of these sessions; most prominent vendor booth location; top billing in all print, social media, and general session acknowledgements, a dressed 6ft table with 2 chairs, all snacks/meals included for two company representatives.

The Real Deal (\$1250): 5 minutes to speak during general session about company product; prominent vendor booth location; print media acknowledgement; social media acknowledgement; General Session acknowledgement; a dressed 6ft table with 2 chairs, electric provided at no charge, meals included for two booth staff.

High Rollers (\$1000): prominent vendor booth location; print media acknowledgement; social media acknowledgement; General Session acknowledgement; a dressed 6ft table with 2 chairs, meals included for two booth staff. (\$25.00 if electric is needed at the booth)

Royal Flush (\$750): social media acknowledgement; print media acknowledgement; General Session acknowledgement; a dressed 6ft table with 1 chair, meals included for one booth staff. (\$25.00 if electric is needed at the booth)

Full House (\$500): social media acknowledgement; print media acknowledgement; a dressed 6ft table with 1 chair, breakfast and lunch for one booth staff. (\$25.00 if electric is needed at the booth)

Level of sponsorship is _____ in the amount of \$ _____

Electricity is needed? **YES** or **NO** (circle one) \$ _____

Additional booth staff? **\$75.00 pp YES** or **NO** (circle one) \$ _____

Total amount enclosed \$ _____

Please check all that apply.

____ Yes, I will be providing a door prize raffle item for the attendees.

____ YES, I will be providing promotional materials to the attendees.

Please mail checks to the: NY Statewide Payroll Conference Association, PO Box 1624 Fairport, NY 14450 (NOTE * additional staffing fees.)

Exhibitor/Sponsor Contact: _____

Exhibitor/Sponsor Company: _____

Type of Business/Service: _____

Address: _____

Phone: _____ Fax: _____ Website: _____

E-Mail Address: _____

Name of attendee for badge(s) _____

Name of attendee for badge(s) _____