



Community Options, Inc.

Supporting People with Disabilities since 1989

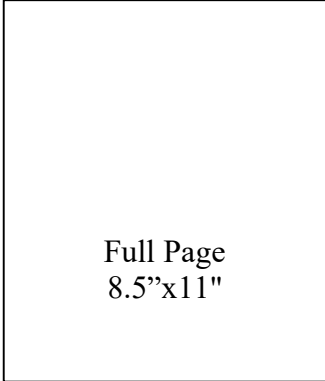

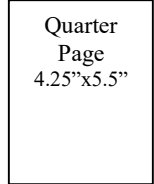

12th Annual iMatter Conference “Foundations for Growth: Learning from Others”

September 23-26, 2018
Andaz Scottsdale Resort & Spa
Scottsdale, Arizona

Conference Sponsorship Opportunities

<p>Headline Sponsor \$25,000</p> <p>Includes company logo on all print, electronic and social media. Six free registrations for your employees. This allows for 10 people with disabilities and their families to attend the conference for free!</p>	<p>Awards Dinner Sponsor \$10,000</p> <p>Includes company logo on all print collateral and social media mention. Four conference registrations for your employees. This level allows for 5 people with disabilities and their families to attend the conference for free!</p>	<p>Welcome Reception Sponsor \$7,500</p> <p>Includes display of company logo at event and on all print collateral. Two conference registrations for your employees. This level allows 3 people with disabilities and their families to attend the conference!</p>	<p>Conference Exhibitor \$5,000</p> <p>Exhibit space for two days, includes 6' draped table top with 2 side chairs. Benefits include full page ad in conference program journal, listing on the conference website and access to 170+ Human Service Professionals</p>
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Program Journal Advertising Opportunities

 <p>Full Page 8.5"x11"</p>	 <p>Half Page 8.5x5.5"</p>	 <p>Quarter Page 4.25"x5.5"</p> <p>Quarter Page 4.25x5.5"</p>	 <p>Business Card 3.5x2"</p>
<p>\$750 + Logo Placement on Conference Website, Facebook Link and Tweets about Sponsorship! Great Value!</p>	<p>\$300 + Logo Placement on Conference Website!</p>	<p>\$150 + Facebook Link</p>	<p>\$75</p>

Ad Journal Registration Form

You may attach a hard copy of your ad, email your ad in PDF, TIFF or JPEG to lisa.smith@comop.org or attach the text of an ad and we will create an ad for you.

Name: _____ Title: _____

Company: _____

Address: _____

State: _____ Zip: _____

Phone #: _____ Fax: _____

Email: _____

Payment Methods

Please indicate your form of payment.

Checks should be made payable to **Community Options, Inc.**

Check: Check # _____

Credit Card: Visa MasterCard Discover American Express

Print Name on Credit Card: _____

Signature: _____

Credit Card #: _____

Expiration Date: _____ CV#: _____

Billing Address if Different than above:

Address: _____

State: _____ Zip: _____

Phone #: _____ Fax: _____

Please mail your Ad Journal Registration form to:

Lisa Smith
Community Options, Inc.
16 Farber Road
Princeton, NJ 08540