



NCSA Central Florida Chapter 2021 Circle of Excellence Sponsorship Form

Date: _____

_____ Yes, I/we will participate in the 2021 Circle of Excellence Program by offering the sponsorship amount as indicated below. I understand that becoming a sponsor allows for the following benefits:

- **Special signage recognizing my organization at the Registration Table (day of event)**
- **Inclusion of my organization on the Central FL website**
- **Inclusion of my organization during the presentation of awards**
- **Ad space as noted below**

Sponsorship Levels:

_____ **\$500 – Platinum** (includes full page ad to appear **in the front** of the 2021 program)

_____ **\$250 – Gold** (includes full page ad to appear **in the back** of the 2021 program)

_____ **\$150 – Silver** (includes ½ page ad **towards the front** of the 2021 program)

_____ **\$100 – Bronze** (includes ½ page ad **towards the back** of the 2021 program)

_____ **Other** \$ _____

Company	
Company Address	
Contact Name	
Title of Contact Person	
Telephone	
Email	

- I will mail a check to: Central FL Chapter NCSA, 127 W. Fairbanks Ave. PMB # 369, Winter Park Florida 32789
- I would like to request an Invoice. Please email to: _____
- I will pay by credit card at a monthly chapter meeting or over the phone.

Please include your logo for use in promotional materials and for recognition purposes.

****Images from the web are generally not suitable for printing.***

Thank you for your participation.

NCSA Central Florida is committed to celebrating all of our service stars throughout our community.

Return Completed Forms To circleofexcellence@centralfloridancsa.com