

SPONSORSHIP APPLICATION

Secure Your Sponsorship Opportunity!

Please fax or email the completed Sponsorship Application to Newmarket International, Inc. corporate office. Please direct this information to:

Newmarket International, Inc.
 Attn: NewmarketPLUS 2010
 Fax: 603.436.1826
 Email: marketinginfo@newmarketinc.com

Customize your participation at NewmarketPLUS 2010! Begin your conference participation with the standard sponsorship package. Then increase your visibility to conference attendees by selecting additional items from our enhancement menu. For full details on what is included in each sponsor package or enhancement option, visit www.newmarketinc.com/niplus.aspx.

Sponsorship Package (Please check sponsorship choice)	Sponsorship Fee (U.S.)
<input type="checkbox"/> Standard Sponsorship	\$ 4,000
Enhancement Options	
<input type="checkbox"/> Exclusive Welcome Reception Sponsorship*	\$12,000
<input type="checkbox"/> Partnered Welcome Reception Sponsorship**	\$ 5,000
<input type="checkbox"/> Wireless Internet Accessibility Sponsorship	\$ 5,000
<input type="checkbox"/> Exclusive Provider of Digital Signage*	\$ 5,000
<input type="checkbox"/> Host a Breakout Room Sponsorship	\$ 2,500
<input type="checkbox"/> Consultation Reservation Sponsorship	\$ 1,000
<input type="checkbox"/> Meals Sponsorship	\$ 1,000
<input type="checkbox"/> Exclusive Pre-Conference Email Communication	\$ 500
<input type="checkbox"/> Promotional Item Distribution Sponsorship	\$ 500

* This opportunity is limited to one partner sponsor.

** This opportunity is limited to three partner sponsors. This package will not be available if the Exclusive Welcome Reception sponsorship is selected.

Please provide sponsor company information (to appear in conference materials):

Company: _____

Address: _____

City, State/Province: _____

Postal Code: _____

Country: _____

Web Address: _____

Telephone: _____

Fax: _____

Event Contact Information (person responsible for all sponsorship logistics and deliverables):

Name: _____
Title: _____
Telephone: _____
Fax: _____
Email: _____

Payment Information:

- Check (Enclosed, payable to **Newmarket International** in U.S. dollars)
 VISA American Express MasterCard Discover

Cardholder's Name: _____
Cardholder's Billing Address: _____
City/State/Postal Code: _____
Country: _____
Credit Card Number: _____
Expiration Date: _____
Cardholder's Signature: _____
Sponsorship Amount Charged: _____

Sponsorship Authorized By:

Signature: _____
Printed Name: _____
Title: _____
Date: _____

+ If paying by **credit card**, please complete the application and fax or email to:
Newmarket International, Inc. Fax: 603.436.1286
Attn: NewmarketPLUS 2010 Email: marketinginfo@newmarketinc.com

+ If paying by **check**, please make the check payable to **Newmarket International** and mail the full sponsorship fee to the following address. Please reference NewmarketPLUS 2010 Sponsorship on the check.

Newmarket International, Inc.
Attn: Accounts Receivable
75 New Hampshire Ave, Suite 300
Portsmouth, NH 03801

+ Sponsorships are not confirmed until payment is received and you receive written confirmation from Newmarket International. Full payment of non-refundable sponsorship fees must be received by Monday, April 5, 2010 to secure your sponsorship opportunity and exhibit space.
