**Montana Association of Student Financial Aid Administrators**

**2017 Corporate Support Agreement**

The MASFAA Executive Board approved the corporate support packages for the 2017 year. This allows corporations to advertise to MASFAA members through several means. We invite you to offer your support to MASFAA through a package listed below.

**Association Advertising Package: $800**

* One Conference Registration
* Annual Conference Exhibit Table
* Verbal Corporate Update (maximum of 5 minutes)
* Co-sponsored badge recognition
* Copies of the conference registration list with name, title, institution and e-mail address (1 copy approximately 30 days out from the conference; exhibitors are allowed to utilize the information to conduct any pre-conference marketing to registered attendees)
* Website Advertisement on MASFAA’s website\*
* Power Point of MASFAA member logo throughout the conference\*

**Conference Table & Advertising Package: $650**

* One Conference Registration
* Annual Conference Exhibit Table
* Verbal Corporate Update (maximum of 5 minutes)
* Power Point of MASFAA member logo throughout the conference\*

**MASFAA Supporter Package: $200**

* Power Point of MASFAA member logo throughout the conference\*

\* Logos must be sent to [emily.williamson@msubillings.edu](mailto:emily.williamson@msubillings.edu), by 3/30/17

Individual or Organizational members or non-members of MASFAA may make a donation to MASFAA of any amount without MASFAA recognition.

**Corporate Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Please print*

**Mailing Address:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Street or P.O. Box City State Zip*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Contact Person Title*

(\_\_\_\_) \_\_\_\_\_\_-\_\_\_\_\_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_\_-\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Phone Fax E-mail Address*

Name of person to contact if different from above: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Direct Phone Number (\_\_\_)\_\_\_\_\_-\_\_\_\_\_\_\_\_ E-Mail Address\_\_\_\_\_\_\_\_\_\_\_\_-\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Corporate Support for 2017:** Advertising Package: $\_\_\_\_\_\_\_\_\_\_\_\_ Donation Only: $\_\_\_\_\_\_\_\_\_\_\_

* Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please send your check payable to **MASFAA** with this form to:

Sandy Johnsrud, MASFAA Treasurer

Montana State University- Northern

PO Box 7751

Havre, MT 59501

*Thank you for your generous support of MASFAA mission, projects and member training. If you have questions please contact* ***Emily Williamson***  *– 2016 MASFAA President or* ***Roxy Jacobson****– 2016 MASFAA Associate Delegate.*