**THE ILLINOIS SELF-INSURERS’ ASSOCIATION**

**44th ANNUAL MEETING AND EDUCATIONAL SEMINAR**

**WEDNESDAY, SEPTEMBER 21, 2022**

**AT THE HYATT LODGE IN OAK BROOK, ILLINOIS**

Please complete this form and send a check payable to the ISIA at the address below

**SPONSORSHIP**

**OPPORTUNITIES**

Our Company wants to **SPONSOR** the following event/item:

Please check box for your selection.

**NOTE:**

**ARE YOU INTERESTED**

**IN EXHIBITOR SPACE?**

[ ] Yes [ ] No

**$3,500.00 Opportunities**

**GOLD SPONSOR**

**Includes admission for three people**

[ ] Continental Breakfast

[ ] Luncheon

[ ] Audiovisual

**$2,500.00 Opportunities**

**SILVER SPONSOR**

**Includes admission for two people**

[ ] AM Break

[ ] PM Break

**$1,500.00 Opportunities**

**BRONZE SPONSOR**

**Includes admission for one person**

[ ] Speakers’ Gifts

**OR** register and pay online at [www.illinoisselfinsurance.org](http://www.illinoisselfinsurance.org).

Illinois Self-Insurers’ Association Phone: 312-804-3534

20 N. Clark Street, Suite 900 Fax: 312-629-8518

Chicago, IL 60602-4195 Email: info@illinoisselfinsurance.org

**EXHIBITOR**: Please complete the following information:

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

Company Name Primary contact

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Address Phone

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City, State, Zip Email

[ ]  Member Rate $850 [ ]  Non-Member Rate $1,450

**ADDITIONAL EXHIBITORS** (register at attendee rate):

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

Name Name

[ ]  Member Rate $350 [ ]  Non-Member Rate $500

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**SPONSOR**: Please complete the following information and select side panel:

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

Company Name Primary contact

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Address Phone

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

City, State, Zip Email

[ ]  GOLD $3,500 [ ]  SILVER $2,500 [ ]  BRONZE $1,500

 (3 people) (2 people) (1 person)

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Name Name

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Name