

Sponsorship and Exhibit Application

Company name: _____

Exhibit contact name: _____ Title: _____

Address: _____

City: _____ State: _____ Zip code: _____

Phone: _____ Email: _____ Website: _____

Sponsorship and Exhibit Opportunities

Sponsorship Levels

(Includes Exhibit Table)

- ☐ **NCJFCJ Presenting Partner \$44,000**
 - ☐ NCJJ Presenting Sponsor \$25,000
 - ☐ 90th Presenting Sponsor \$25,000
- ☐ **NCJFCJ Platinum Partner \$35,000**
 - ☐ NCJJ Platinum Sponsor \$20,000
 - ☐ 90th Platinum Sponsor \$20,000
- ☐ **NCJFCJ Gold Partner \$26,000**
 - ☐ NCJJ Gold Sponsor \$15,000
 - ☐ 90th Gold Sponsor \$15,000
- ☐ **NCJFCJ Silver Partner \$17,000**
 - ☐ NCJJ Silver Sponsor \$10,000
 - ☐ 90th Silver Sponsor \$10,000
- ☐ **NCJFCJ Bronze Partner \$8,000**
 - ☐ NCJJ Bronze Sponsor \$5,000
 - ☐ 90th Bronze Sponsor \$5,000

Additional Sponsorships

- ☐ **Conference App Partner \$10,000**
 - ☐ NCJJ App Sponsor \$6,000
 - ☐ 90th App Sponsor \$6,000
- ☐ **Conference Wi-Fi Partner \$10,000**
 - ☐ NCJJ Wi-Fi Sponsor \$6,000
 - ☐ 90th Wi-Fi Sponsor \$6,000
- ☐ **Conference Tote Partner \$10,000**
 - ☐ NCJJ Tote Sponsor \$6,000
 - ☐ 90th Tote Sponsor \$6,000

Conference Program Advertising

- ☐ Program sponsor \$6,000
- ☐ Full page \$1,000
- ☐ Half page \$650
- ☐ Quarter page \$400

Exhibiting Opportunities

- ☐ **NCJFCJ Exhibiting (C/B) Partner* \$5,000**
 - ☐ NCJJ Exhibiting Sponsor* \$3,000
 - ☐ 90th Exhibiting Sponsor* \$3,000
- ☐ **NCJFCJ Exhibit (N/G) Partner* \$4,000**
 - ☐ NCJJ Exhibiting Sponsor* \$2,500
 - ☐ 90th Exhibiting Sponsor* \$2,500

*Includes 2 full conference registrations. Prices increase 1/16/27.

Exhibitor Fee

- ☐ NCJJ \$1,000
 - ☐ 90th Annual Conference \$1,000
- Prices increase 1/16/27.

Additional Exhibitor Fee Per Person (if not included)

- ☐ Member \$695 by 1/16 \$745 by 3/6 or 4/30 \$795 by 3/14 or 6/29
- ☐ Non-member \$895 by 1/16 \$945 by 3/6 or 4/30 \$995 by 3/14 or 6/29

☐ NCJFCJ Member Status (please check one):

- ☐ Member*
- ☐ Non-member

Additional Marketing Opportunities

- ☐ **Conference Tote Insert \$1,000**

Primary Service (please check one):

- ☐ Information services
- ☐ Residential or behavioral treatment services
- ☐ Technology services
- ☐ Other _____

TOTAL DUE: _____

Exhibitor Name (included in booth fee): _____ Email: _____

Additional Exhibitor Name #1: _____ Email: _____

Additional Exhibitor Name #2: _____ Email: _____

Company Description: Please provide or attach a brief description, 30 words or less, of the products or services you will be exhibiting at the Conference. The description will be included in the Conference App if received by February 11 or June 11.



COMPANY NAME (as entered on page one): _____

Payment terms: Payment is due at the time of application. Confirmation and receipt will be sent as soon as your application has been reviewed and payment has been processed.

Cancellation terms: **There are no refunds for received sponsorships.** All requests for exhibitor registration cancellations or refunds must be made in writing. We are unable to refund any processed sponsorships. All accepted cancellations will incur a \$100 administrative fee. No cancellations or refunds will be considered after February 14th for our National Conference on Juvenile Justice and June 12th for our 90th Annual Conference.

Payment Method:

Check enclosed (payable to NCJFCJ) Visa MasterCard Discover AMEX

Name on Card: _____

Card #: _____ **Exp. Date:** _____ **3-digit code:** _____

Authorized Signature: _____

Exhibitor Responsibility:

The exhibitor agrees that the National Council of Juvenile and Family Court Judges (NCJFCJ) and any other officers, staff members, agents or employees are not responsible for and are released from all liability for any injury, loss or damage that may occur to exhibitor, the exhibitor's agents or employees, or any other person, or person's property prior, during or subsequent to the 90th Annual Conference and the 2027NCJJ Conference.

NCJFCJ does not maintain insurance covering the exhibitor's property. It is the sole responsibility of the exhibitor to obtain the appropriate amount of insurance to cover the property, agents or employees from theft, damage by fire, accident or any other cause.

Authorized Signature: _____ **Date:** _____

Print Name & Title: _____

*****FOR SECURITY REASONS, DO NOT E-MAIL THIS APPLICATION WITH PAYMENT INFORMATION. PLEASE COMPLETE APPLICATION AND NOTE A PHONE NUMBER TO PROCESS TELEPHONE PAYMENT*****

Return application to:

National Council of Juvenile and Family Court Judges

ATTN: Registrar

P.O. Box 8970, Reno, NV 89507

Or, via secure fax at (775) 507-4848

For questions, contact ardis.parmer@gmail.com or at (775)772-9121.

Please Note: The National Council of Juvenile and Family Court Judges (Federal ID #362486896) is a 501(c)(3) tax-exempt organization, as defined in section 509(a)(1) and 170(b)(1)A(vi) of the Internal Revenue Code. A portion of your sponsorship may be tax deductible to the extent allowed by law. Please contact your tax advisor.