

2016 Chapter Leadership Institute

July 21-23 Fort Worth, TX

Wortham Renaissance Fort Worth



Join ALA & 300 Chapter Leaders



Chapter Leadership Institute

July 21-23, 2016 Wortham Renaissance Fort Worth
Fort Worth, TX



Reach ALA's Chapter Stakeholders

Join us at ALA's Chapter Leader Institute (CLI) where chapter Officers and volunteer leaders come together to strengthen leadership roles, share ideas and expand their networks for chapter's and regions.

Don't miss your chance to make a bold impression with chapter leaders!

Who Attends? Meet 300 ALA Members:

- Chapter President-Elects
- Chapter Officers
- Members interested in becoming a Chapter officer
- Regional Leadership Teams
- Board of Directors

Premier Chapter Leadership Sponsor - \$10,000

(4 exclusive opportunities)

- 4 full registrations
- Introduction at Opening Session and Welcome Reception
- Ability to greet the crowd
Address audience during a general session *(60 seconds)*
- Participation as thought leader
at 1 panel session *(limited based upon availability)*
- 1 table top display
- Logo on signage, slide deck, website and marketing emails as Premier Leadership Sponsor
- Inclusion in 2 marketing messages
(logo, 25 words, link) to attending ALA members
- Chair-drop of your collateral or brochure at Opening Session
- 1 hand-out in registration packet
(in attendee packet)

Chapter Leadership Sponsor - \$4,995

(6 exclusive opportunities)

- 2 full registrations
- Participation as thought leader
at 1 panel session *(limited based upon availability)*
- 1 table top display
- Logo on signage, website and marketing emails as Supporting Leadership Sponsor
- Inclusion in 1 marketing message
(logo, 25 words, link) to attending ALA members
- 1 hand-out in registration packet
(in attendee packet)

Schedule of Events

alanet.org/cli

Contact & Reservations

To reserve your space contact:

667-206-4266

Chapter Leadership Institute

July 21-23, 2016 - Worthington Renaissance Fort Worth, Fort Worth, TX



2016 ALA Specialty Conferences Exhibit and Sponsorship Agreement

SIGN UP

Please complete, sign, and email to your Business Development Representative

OR

Fax to 443-281-0660

Written confirmation will follow

Agreement: It is understood that this application will become a binding contract upon acceptance by ALA, and in incorporated into this contract are the following terms, conditions and the Rules and Regulations (found at <https://www.alanet.org/sc/blc/exhibitors/RulesRegulations.pdf>). The individual signing this agreement represents and warrants that he/she is authorized to execute this binding agreement on behalf of the exhibiting company, and should they be removed from their position, the contracting organization is required to fulfill the obligations under this agreement.

Payment Policy: Applications must be accompanied by payment in full. CONTRACTS WILL NOT BE PROCESSED WITHOUT PROPER PAYMENT. No exceptions will be made.

Acceptance: The ALA reserves the right to exercise its sole discretion in acceptance or refusal of applications. If an applicant is not accepted by ALA, all money paid will be returned to the applicant.

Space Assignments: Priority for space assignments is based on date of received agreement (see Rules and Regulations bit.ly/ACExRules).

Cancellations: By signing this agreement, the exhibiting company and individuals representing exhibiting company understand that this agreement and all its terms, conditions, and rules are non-cancellable. Exhibiting company is responsible for payment of the total amount due to ALA as represented in this agreement, regardless of exhibitor attendance or lack of attendance at the events represented in this agreement. All terms, conditions, and Rules and Regulations (found at <https://www.alanet.org/sc/blc/exhibitors/RulesRegulations.pdf>).



**Premier Chapter
Leadership Sponsor**

\$10,000



**Chapter Leadership
Sponsor**

\$4,995

Contact Information

Company Name: _____

Company Address: _____

City: _____ State: _____ Zip: _____

Web Address: _____

Primary Contact Person: _____ Title: _____

Email Address: _____ Phone: _____

Alternate Contact Person: _____ Title: _____

Email Address: _____ Phone: _____

Billing Information

Invoice my company at the provided address. I understand that payment is due upon receipt of invoice. Make checks payable to the Association of Legal Administrators, Attn: Account receivables-ALA, P.O. Box 95583, Chicago, IL 60694-5583, for U.S. Dollars only.

Credit Card:

I authorize ALA to charge \$ _____ to the credit card below.

Card Type: Visa MasterCard AMEX

Card Number: _____ Exp: _____ Security Code: _____

Billing Address if different then above: _____

City: _____ State: _____ Zip: _____

Signature (X) _____

Date: _____ Print Name _____ Title: _____