

# Society for Benefit-Cost Analysis

11TH ANNUAL CONFERENCE & MEETING  
MARCH 13-15, 2019  
WASHINGTON, DC

## Sponsorship Opportunities

Sponsoring a social event during the [Society for Benefit-Cost Analysis 2019 Annual Conference and Meeting](#) raises the profile of your institution and supports the Society's mission of continuing to strengthen the theory and application of benefit-cost analysis. As a sponsor, you will reach over 300 attendees from academia, nonprofits, businesses, and government agencies around the world, as well as the numerous visitors to our website.

Please visit the [SBCA website](#) at or contact [sjones@virtualinc.com](mailto:sjones@virtualinc.com) for more information.

As an event sponsor, you will receive broad recognition consistent with your level of support, including:

- Listing on the conference webpage.
- Acknowledgement in the conference program, print copies of which will be distributed to all attendees.
- The program will also be posted as a PDF on the website.
- Signage at the event.
- Public acknowledgement in remarks by the SBCA President.

The following sponsorship opportunities are available:

- \$4,000 Keynote Lunch (March 14)
- \$4,000 Membership Lunch (March 15)
- \$4,000 Breakfast (March 14 or 15)
- \$2,500 Opening Reception (March 13)
- \$2,500 Networking Reception (March 14)
- \$2,500 Closing Reception (March 15)
- \$1,500 Break Refreshments (March 14 or 15)

Opportunities for exhibiting and placing ads in the program are also available; see the SBCA website for more information.

**Sponsorship opportunities are limited and are provided on a first-come, first-served basis. Please complete and return the commitment form in this as soon as possible.**

**Society for Benefit-Cost Analysis**  
11130 Sunrise Valley Drive – Suite 350  
Reston, VA 20191

[sjones@virtualinc.com](mailto:sjones@virtualinc.com) | <http://www.benefitcostanalysis.org>

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## Sponsor, Advertiser and Exhibitor Commitment Form

### Contact Information:

Name \_\_\_\_\_  
Title \_\_\_\_\_ Affiliation/Employer \_\_\_\_\_  
Street Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip/Postal Code \_\_\_\_\_ Country \_\_\_\_\_  
Phone \_\_\_\_\_ Email \_\_\_\_\_ Website \_\_\_\_\_

### Billing Information:

If paying by credit card, billing information must match credit card billing information.

Check if billing information is same as contact information.

Name \_\_\_\_\_  
Title \_\_\_\_\_ Affiliation/Employer \_\_\_\_\_  
Street Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip/Postal Code \_\_\_\_\_ Country \_\_\_\_\_  
Phone \_\_\_\_\_ Email \_\_\_\_\_ Website \_\_\_\_\_

### Payment Information:

#### Sponsors\*

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- \$1,500 Break Refreshments (March 14 or 15)
- Other contribution toward event costs \$ \_\_\_\_\_

Total Enclosed: \$ \_\_\_\_\_

#### Advertisers\*\*

- \$400 Full Page Ad Color
- \$300 Half Page Ad Color
- \$250 Full Page Ad B&W
- \$150 Half Page Ad B&W

#### Exhibitors

- \$500 Exhibit Table Fee

\*Sponsors should provide a print-ready copy of their logo along with this commitment form.

\*\* Advertisers must provide a print-ready copy of their ad no later than **February 18, 2019**.

### Method of Payment:

CREDIT CARD (please check one)     CHECK made payable to Society for Benefit-Cost Analysis  
 Visa             MasterCard  
Card number \_\_\_\_\_ Expiration date \_\_\_\_\_ CVV code \_\_\_\_\_

### Please enclose check (if applicable) and send this form to:

Society for Benefit Cost Analysis  
11130 Sunrise Valley Drive – Suite 350, Reston, VA 20191  
Email: [sjones@virtualinc.com](mailto:sjones@virtualinc.com) P: 703-234-4139

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