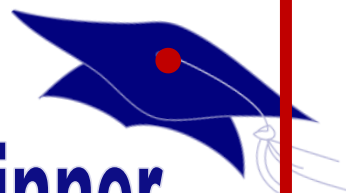




Apprenticeship Graduation Ceremony & Dinner



Tuesday, May 12, 2020 ~ 5:00 pm
Aqua Turf Club / 556 Mulberry Street, Plantsville, CT

Please join us as we honor our 2020 Graduating Class.
Our dedicated students have worked hard and now it's time to celebrate
with family, friends, co-workers and employers!

DINNER REGISTRATION

Please submit your registration form to IEC-NE by May 1, 2020. Be sure to include each attendees meal choice. Dinner is \$60 per person. The dinner price for children under 12 years of age is \$25. A Vegetarian option is available; please write it in on the form.

Do not include apprentices on this form.

Please fill in the required information on the reverse side of this form.

SPONSORSHIP OPPORTUNITIES

☐ **Platinum Sponsor \$1,500** *(Reserved table for 10 in front, full page program ad and poster at the event.*

Table reservations in front are on a 1st come 1st served basis.)

☐ **Gold Sponsor \$800** *(Half page program ad, two dinners and poster at the event)*

☐ **Silver Sponsor \$350** *(Business card ad)*

☐ **Bronze Sponsor \$150** *(Company listing in program)*

☐ **Vendor Gift Sponsor** *(Recognition in program)*

Camera ready artwork and/or text must be received by 4/15 to be included in the program.

Ad dimensions: Full page - 5.5" x 8.5" / Half page - 4.25" x 5.5" / Business card - 2" x 3.5"

To join us as a sponsor, please fill out the information on the reverse side of this form or call the office and we will take your information by phone.



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DINNER REGISTRATION

\$60 PER PERSON ~ CHILDREN UNDER 12 ~ \$25 (CHICKEN FINGER DINNER)

Attendee Name Pease provide guest names and meal choices, including Platinum Sponsors.	Prime Rib	Chicken Kathryn*	Seared Salmon	Child Under 12

*Chicken Kathryn: Baked, breaded chicken breast w/white wine velouté sauce. **Vegetarian option: Vegetable Lasagna (please write in)

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☐ **Bronze Sponsor \$150** (Company listing in program)

☐ **Vendor Gift Sponsor** (Company listing in program)

Name _____ Grand Total \$ _____

Company _____

Make check payable to **IEC New England**. If paying by credit card please fill in the information below.

Card # _____ Expiration Date _____ Security Code _____

Name as it appears on Card _____ Zip Code _____

Billing Address & Town _____

Signature _____