

# AIA Connecticut Weekly Membership Email Sponsorship Contract

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Your firm name, address, and contact information; brief description, business logo and link to your website may be prominently displayed in the Sponsor Block in the AIA Connecticut weekly membership email.

**To Sponsor a Weekly Email:**

After checking availability, please complete this form and return with payment to:  
AIA Connecticut, Attn: Janice Harris, 370 James Street, Suite 402, New Haven, CT 06513;  
Email: [jharris@aiact.org](mailto:jharris@aiact.org).  
*Limit of 3 consecutive weeks and a maximum of 10 non-consecutive weeks per year.*

**Sponsorship Rates/Payment:**

\$120/week. Affiliate members receive a 25% discount. All sponsorships must be prepaid. Information will not be posted until payment is received. Payment may be made by credit card or check.

**Deadline:**

Sponsorship form, payment, graphic (logo) and advertisement text must be received by 10:00 am on Monday for Tuesday email.

**Image Details:**

Graphic/Logo should be a JPG, PNG, or GIF file with no encryptions, animations or effects. The image should be no more than 400 px wide (a height maximum of 250 px is preferred) and no more than 100 KB in total file size at a 72 dpi setting. (Please note that some adjustment may be necessary for best fit when placed.)

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**Please complete the information below to sponsor the AIA Connecticut Weekly Membership Email.**

I wish to sponsor the Weekly Membership Email for the following weeks at \$120/week.  
Denote week date(s) (Tuesdays) below (10 maximum; limit of 3 consecutive weeks):

\_\_\_\_\_

\_\_\_\_\_

Text (40 words maximum) to be included with your logo: \_\_\_\_\_

\_\_\_\_\_

Web URL: \_\_\_\_\_

**Contact Information:**

Name \_\_\_\_\_ Firm Name \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_

AIA Connecticut member;  Affiliate member

**Payment Options:**

\_\_\_\_ A check for \$ \_\_\_\_\_ made payable to AIA Connecticut is enclosed

\_\_\_\_ Please charge \$ \_\_\_\_\_ to my: \_\_ Visa \_\_ Master Card \_\_ AMEX

Card # \_\_\_\_\_ Exp. Date \_\_\_\_ / \_\_\_\_ Security Code: \_\_\_\_\_

Name on Card \_\_\_\_\_

Card Address (include zip): \_\_\_\_\_