

SPONSORSHIP  
AGREEMENT

## CUES Director Seminars Sponsorship 2024

With the memorandum of agreement, made this \_\_\_\_\_  
day of \_\_\_\_\_ (month), \_\_\_\_\_ (year), Credit  
Union Executives Society, hereinafter known as CUES®, and:

COMPANY NAME (as it will appear in promotional materials.)

ADDRESS

CITY, STATE/PROV., ZIP

WEBSITE ADDRESS

LINKEDIN

@ \_\_\_\_\_  
TWITTER

TELEPHONE

FAX

DIRECT FUTURE CORRESPONDENCE TO (NAME)

CONTACT TITLE

EMAIL ADDRESS OF CONTACT

hereinafter known as "Sponsor," in consideration of sponsorship  
fees for each conference, CUES hereby allows above company to  
attend and receive all sponsorship benefits at indicated events.  
All restrictions, specified for each event, apply.

## Sponsorships

All pricing applies to CUES Supporting and Premier Supplier  
Members. For nonmember pricing or more information on  
membership, contact Kari Sweeney, [kari@cues.org](mailto:kari@cues.org).

## CUES Director Development Seminar

July 30–August 1, 2024  
Monterey, CA

## Supervisory/Audit Committee Development Seminar

July 30–August 1, 2024  
Monterey, CA

Supporting sponsorship for  
both Seminars:  
\$9,000

= \$ \_\_\_\_\_

## Processing Fee

= \$15.00

## TOTAL AMOUNT

= \$ \_\_\_\_\_

## Agreement

I, the duly authorized representative of the undersigned organization, on  
behalf of said organization, subscribe and agree to all terms, conditions,  
authorizations and covenants contained in this Sponsorship Agreement,  
the incorporated CUES Contract Terms and Regulations and the CUES  
Sponsor Code of Ethics.

## ACCEPTED BY SPONSOR

Signature \_\_\_\_\_

Title \_\_\_\_\_ Date \_\_\_\_\_

## ACCEPTED BY CREDIT UNION EXECUTIVES SOCIETY

Signature \_\_\_\_\_

Title \_\_\_\_\_ Date \_\_\_\_\_

## Payment

My payment (in U.S. funds only) of \$ \_\_\_\_\_ is enclosed.

Charge \$ \_\_\_\_\_ to my  Visa  MasterCard  American Express

Credit card number \_\_\_\_\_

Expiration date \_\_\_\_\_ Security Code (CSC) \_\_\_\_\_

PRINT NAME AS IT APPEARS ON CARD

AUTHORIZED SIGNATURE

CREDIT CARD BILLING ADDRESS

**Mail your payment  
along with the  
Sponsorship  
Agreement to:**

Credit Union Executives Society  
P.O. Box 14167  
Madison, WI 53708-0167  
Attn: Kari Sweeney  
Or Email to [kari@cues.org](mailto:kari@cues.org)

**Payment Policy** – Terms are net 30 days from invoice date. Firms with invoices  
not paid in full 30 days prior to start of conference may lose sponsorship benefits.

**Cancellation Policy** – 50% deduction on sponsorship fees will be made on  
cancellations received in writing 30 days prior to start of conference. No refunds  
will be issued within 30 days of start of conference.