

180 Linden Oaks, Suite 100 Rochester, NY 14625 (585) 586-0712 info@techrochester.org

# **Supporting Member Benefits**

# RECOGNIZED AS A SUPPORTER OF THE ROCHESTER TECHNOLOGY COMMUNITY

BUILDING COMPANY AWARENESS		Value
Feature on Social Media	1x/Year	\$125
Discounted Sponsorship Opportunities at Signature Events - <ul> <li>Tech Woman of the Year &amp; GREAT Awards</li> </ul>	✓	
Logo on TechRochester Website and Company Description in Corporate Directory	1	\$150
NEWORKING OPPORTUNITIES		
Free Admission to Quarterly Networking Events, includes Festivus	Up to 5 Guests	\$100
RECRUITMENT ASSISTANCE		
Post the jobs in TechRochester's LinkedIn Group	1x/Month	\$50
Job Openings Posted on TechRochester Website & In Newsletter	2 postings/month	\$1,200
Participation in TR Career-Focused Events (e.g., career fairs, webinars)	✓	
EDUCATION & KNOWLEDGE		
<ul> <li>Discount Pricing at Peer Group Events</li> <li>Peer Groups: Healthcare, Digital Marketing, Women in Tech, Emerging Tech Leaders</li> </ul>	Up to 3 Employees per event	\$110

TechRochester advances the transformation of Rochester into a Top 10 technology region through collaboration, education and recognition.

**Supporting Member Price: \$550** 

WWW.TECHROCHESTER.ORG



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## **Supporting Member Application**

Organization Name:			
Mailing Address:	Primary Contact:		
City/State/Zip:	Title:		
Company Main Number:	Email:		
Fax:	Direct Tel:		
Website:	Mobile:		
Twitter @	Instagram:		
Facebook:	LinkedIn:		

**Company Description** (primary products and/or services; markets/customers served; primary technologies, if applicable):

### **Organization Logo**

Please send your organization logo as a 300 dpi TIFF or JPEG file to kim@techrochester.org.

### **Peer Group Interest:**

Please indicate your interest in participating in one of our peer groups:

Digital Marketing □Emerging Tech Leaders □ Diverse Audiences □Healthcare □Women in Tech □

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Dues Schedule: Supporting Member of Tech Roches	ster \$550			
Payment is accepted by credit card or check. Checks made payable to TechRochester and mailed to the address below. Credit Card – check one: Visa  Mastercard  Discover  Amex				
Card Number		Expiratio	n Date	
Security Code	Cardholder Name			
Signature: Title:		Date:		

## **Additional Organization Contacts:**

Name:	
Email:	
Phone:	
Title:	

Name:	
Email:	
Phone:	
Title:	

Name:	
Email:	
Phone:	
Title:	