NABIP-CO 2026-27 Media Sponsorship Rates

PACKAGE #1: FULL YEAR $2,000

- Two custom email blasts, (content provided by advertiser)
- One hyperlinked banner ad in 4 issues of the newsletter. Dimensions 150px x 600px
- Two social media posts, each to correspond with the email blast (content provided by the advertiser)
- For 12 months, your hyperlinked logo will appear in the:
  - NABIP-CO website homepage
  - Policy Pulse /Insurance Insider email communications

PACKAGE #2: HALF YEAR $1,200

- One custom email blast, (content provided by advertiser)
- One hyperlinked banner ad in 2 issues of the newsletter. Dimensions 150px x 600px
- One social media post to correspond with the email blast (content provided by the advertiser)
- For 6 months, your hyperlinked logo will appear in the:
  - NABIP-CO website homepage
  - Policy Pulse /Insurance Insider email communications

WEBINAR SPONSOR - $400

- Individual Webinar Speaker Intro
- Logo on webinar marketing materials and event website

All media packages include your ad in the electronic quarterly NABIP-CO newsletter, and your company's logo will be featured on our website homepage at **www.nabip-colorado.org**

All ads must be in a DIGITAL format. Files must be in the format of either: .pdf / high resolution; .tif / flattened (300 dpi); .jpg / (300 dpi)

An advertiser who does not complete a contracted schedule will be short-rated. Any ad cancelled after the space reservation deadline will be billed 25 percent for the space reserved. Add a 15 percent premium for guaranteed position; please call for other special requests. Ads must be high resolution; $125/hour design fee applies for changes.

For inquiries contact NABIP-CO · 970-281-7386 · nabipcolorado@gmail.com

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Media Sponsorship Rates

Contract Sign date: _____ Contract Begin date: _____	
Company Name:	
Contact Name:	
Billing Address:	
City/State/Zip:	
Phone:	
E-mail:	
Web Address:	
Authorized Signature:	

Quarterly Newsletter Issue	1. _____ 2. _____ 3. _____ 4. _____
Email Blast/ Social Posts	1. _____ 2. _____
Webinar Sponsor - $400	☐

Pay by Check ☐

Card type: ☐ MC ☐ Visa ☐ Amex ☐ Discover

Card Number: _____ Expiration date (month/year): _____ CVC: _____

Name on card: _____

Billing Address: _____ City, State, Zip: _____

Please return the contract to: **nabipcolorado@gmail.com**

To pay by check, please mail to:

NABIP-CO

312 North Avenue East, Suite 5, Cranford, NJ 07016