

POLICIES & PROCEDURES

Payment

- Full payment is due within 30 days of sponsorship commitment.
- Full payment must be received no later than 45 days before the event.

Space & Assignment

- Each PLATINUM or above sponsor receives one 6-foot table and two chairs.
- Each PLATINUM or above sponsor receives 2 sponsor passes.
- SFISSA reserves the right to modify the floor plan.

Cancellation

- All sponsorship commitments are final and non-refundable.
- SFISSA may, at its sole discretion, offer credit toward a future event

Liability & Insurance

Sponsors/exhibitors participate at their own risk. Organizers are not responsible for theft, damage, fire, or other loss. Sponsors are encouraged to obtain their own insurance coverage. Sponsors agree to indemnify and hold harmless both the venue and SFISSA from any claims arising from their participation.

Code of Conduct

- Treat all members and guests with respect and dignity. Harassment will not be tolerated.
- Conduct yourself professionally; avoid offensive language or imagery.
- Do not reference other companies negatively in presentations.
- Presentations should focus on delivering cybersecurity value, not product promotion.
- Maintain confidentiality of sensitive information encountered during the event.

Questions or concerns? Contact us at conference@sfissa.org or board@sfissa.org

SPONSOR COMMITMENT FORM

Complete this form and return to conference@sfissa.org. SFISSA will respond with confirmation if the option is still available.

An invoice will be sent to your AP contact.

For questions: board@sfissa.org

Selected Sponsorship Level

- Headline — \$12,000
- Diamond — \$6,500
- Platinum — \$4,000
- Gold — \$2,500

Add-Ons are for Platinum of above sponsors:

- Add-On: CISO Dinner — \$8,000
- Add-On: T-Shirt Sleeve — \$2,000
- Add-On: Conference Bag & Lanyard — \$2,500
- Add-On: Wi-Fi Sponsor — \$2,500
- Add-On: Refreshments — \$2,500
- Add-On: Lunch — \$2,500
- Add-On: Reception — \$2,500
- Add-On: Speaker Gifts — \$2,500
- ISSA Foundation Contribution — \$1,000

Total

Total: _____

Sponsor Company & Contact Information

Primary Contact: _____

Title: _____

Address: _____

Phone: _____

Email: _____

Signature: _____

Date: _____

Accounts Payable Contact

Please identify the contact who will submit electronic payment.

Contact Name: _____

Phone: _____

Email: _____