

IIABSC PALMETTO PARTNERS PROGRAM 2027 PLEDGE FORM



**Complete pages 5 & 6 and email to kshepard@iiabsc.com no later than Dec. 30.
Payment due no later than January 30, 2027.**

ORGANIZATION NAME: _____
(Print EXACTLY as it should appear on partner promotional materials)

We want to be a Palmetto Partner at the selected level:

☐ **Diamond Elite** \$14,000
 ☐ **Diamond** \$12,500
 ☐ **Platinum** \$10,500
 ☐ **Gold** \$8,500
 ☐ **Silver** \$5,500
 ☐ **Bronze** \$3,500

SELECT YOUR CHOSEN UPGRADES:

	Platinum	Gold	Silver	Bronze
Upgrade ad space in SPRING CONFERENCE event program	1/4 page \$450	bus. card \$300	n/a	n/a
Upgrade ad space in ANNUAL CONVENTION event program	Full Page \$200	1/2 Page \$200	1/4 \$200	1/4 \$200
ENTER THE SUM of all Upgrade items (chosen for your level)	\$ _____	\$ _____	\$ _____	\$ _____

ENTER OVERALL TOTAL AMOUNT DUE

(Level + Upgrades total): \$ _____

☐ I DO ☐ I DO NOT

wish to be solicited for additional enhanced event sponsorships or Big "I"-related contributions.

All additional event sponsorship opportunities would be offered on a first come, first reserved basis. Pricing varies by item. Additional Big I -related contributions would support association activities not included in the main Palmetto Partnership program, including but not limited to Young Agent & Agent regional gatherings, InsurPac prizes, IIABSC Foundation, etc.

We plan to submit payment: ☐ Before Dec. 30, 2026 ☐ Between Jan. 1-30, 2027

Your REQUIRED signature below serves as your firm commitment to the 2027 Palmetto Partnership level selected on this form and agreement to submit payment in full to IIABSC by the deadline specified. Signature provides confirmation that partners have reviewed the payment and program policies on the Palmetto Partner Program webpage at www.iiabsc.com.

Printed Name: _____

Signature: _____

Intended Form of Payment:

- ☐ **CHECK**
Company CHECK will be submitted by Jan. 30, 2027
- ☐ **ACH**
Company rep should email Deneé Brooks (dbrooks@iiabsc.com) to setup payment via ACH bank deposit by 1/30/27.
- ☐ **Credit Card**, if necessary
If you must pay by credit card there will be a 4% processing fee. Email Kate Shepard (kshepard@iiabsc.com) to coordinate this request and set up a secure payment link.

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Contact information is very **IMPORTANT!**

The people listed as main contacts are the only ones who will receive Partner correspondence pertaining to event registration schedules, sponsorship, exhibit booth selection, etc. **You must REGISTER to redeem majority of partner benefits.**

PAGES 5 & 6 ARE REQUIRED to be completed in full and emailed to kshepard@iiabsc.com by Dec. 30, 2026 to indicate your intentions to participate in 2027 Palmetto Partner program.

ORGANIZATION NAME: _____
(Print EXACTLY as it should appear on partner promotional materials)

Mailing Address: _____
(City/State/Zip)

Street Address: _____
(City/State/Zip)

Website: _____

PALMETTO PARTNER MAIN CONTACT NAME: _____

Mailing Address: _____
(City/State/Zip)

Main Contact Email: _____ Main Contact Phone: _____

Additional PALMETTO PARTNER CONTACT NAME: _____

Mailing Address: _____
(City/State/Zip)

Contact Email: _____ Contact Phone: _____

Additional PALMETTO PARTNER CONTACT NAME: _____

Mailing Address: _____
(City/State/Zip)

Contact Email: _____ Contact Phone: _____

KEY DECISION MAKER NAME*: _____

Contact Email: _____

**For membership record-keeping purposes. If there are more than one, please attach names & email addresses separately*

We need your logo!

Please send a vector file to Anita Trevino
(atrevino@iiabsc.com) by January 30.

Submit payment to:
IIABSC, 800 Gracern Rd, Columbia, SC 29210

**Pledge form due by December 30, 2026 •
Payment due no later than January 30, 2027**