



# *HIV Alliance*

## *Big Night Sponsorship*

Expand your philanthropic image and visibility by partnering with HIV Alliance—a client-centered & innovative non-profit organization that continuously challenges “what’s possible” in client care and in the prevention of infectious diseases.

# Sponsorship Levels

## How you can help

We offer several levels of sponsorship — from \$250 to \$5,000. Each option comes with a variety of benefits that will give your business positive exposure and help you to fulfill your philanthropic goals.

	Life \$5,000	Hope \$2,500	Strength \$1,000	Love \$500	Community \$250
Opportunity for sponsor to speak at event	✓				
Logo placement in annual impact report	✓	✓	✓		
Logo featured on printed invitations	✓	✓	✓	✓	
Logo featured on event social media materials & Facebook & website event pages	✓	✓	✓	✓	✓
Complimentary tickets for signature events. Number:	8	6	4	2	
Ad placement on program Ad size:	Full Page	Half page	Quarter page	Eight page	
Logo featured on website with link to yours for one year	✓	✓	✓	✓	✓
Sponsorship recognized verbally & in print at the event	✓	✓	✓	✓	✓

# HIV Alliance Sponsorship Form 2018

Date: \_\_\_\_\_

Sponsorship Level: \_\_\_\_\_

Contact Name & Title: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone (office): \_\_\_\_\_ (cell): \_\_\_\_\_

FAX: \_\_\_\_\_ Email: \_\_\_\_\_

Sponsor/Company Name should appear as:  
\_\_\_\_\_

## Sponsorship Levels

- Life (\$5,000)
- Hope (\$2,500)
- Strength (\$1,000)
- Love (\$500)
- Community(\$250)

## Method of Payment:

Check enclosed (payable to HIV Alliance)

Invoice

Credit Card

Credit Card No. \_\_\_\_\_

Expiration Date: \_\_\_\_\_ CVV Code: \_\_\_\_\_

Visa  MasterCard  Discover  American Express

Signature: \_\_\_\_\_

## For questions & to return form:

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