

SPONSOR INFORMATION

Name _____ Company _____

Email _____ Phone _____

EVENT DATE _____ **CITY/REGION** _____

SPONSOR LEVEL – Please select option.	COST
<input type="checkbox"/> ANNUAL (This option is <i>only</i> available to BioFlorida Members) <ul style="list-style-type: none"> • Promoted as Annual Sponsor for the year (3 meetings in a specified region; 1 meeting in another region of choice) • Recognition as Annual Sponsor in all marketing communications & social media for each event selected • Dedicated time to kickoff event, welcome guests and introduce company • Exhibit or dedicated space for corporate literature • 7 COMP admissions to event 	\$3,000 (BioFlorida Members Only)
<input type="checkbox"/> HOST CRITERIA: Work directly with BioFlorida and the Chapter Leadership to coordinate logistics and food and beverage for the event at Host site. <ul style="list-style-type: none"> • Recognition as Host in all marketing communications & social media for the event • Dedicated time to kickoff event and welcome guests • Exhibit or dedicated space for corporate literature • 5 COMP admissions to event 	Members \$1,200 Non-Members \$1,500
<input type="checkbox"/> SIGNATURE <ul style="list-style-type: none"> • Recognition as Signature Sponsor in all marketing communications & social media for the event • Dedicated time for company introduction • Exhibit or dedicated space for corporate literature • 4 COMP admissions to event 	Members \$1,000 Non-Members \$1,250
<input type="checkbox"/> EVENT SPONSOR <ul style="list-style-type: none"> • Recognition as Event Sponsor in all marketing communications & social media (when applicable) • 2 COMP admissions to event 	Members \$500 Non-Members \$650

PAYMENT INFORMATION
 Send me an invoice
 I'm sending a check
 Here is my credit card:
 VISA
 MC
 AMEX

Card No. _____ Exp. Date _____ Security Code _____

Name on Card _____

Billing Address _____ City, State, Zip _____

TERMS

Commitments must be made at least 2 weeks prior to event and all payments must be received prior to event. Sponsorship benefits are not active until payment is received in full. No refunds are permitted.

Signature _____ **Date Submitted** _____

**By signing this form you are agreeing to the terms stated and commit to full payment of the option checked.*