



## **Sponsorship Opportunities**



# GIFT OF LIFE SUMMIT

## SPONSORSHIP OPPORTUNITIES

### PLATINUM

**\$20,000**

- Exhibit Space at the event
- Your logo as the Platinum Sponsor on banner
- Podium Time to present Major Award of your choice
- Your logo displayed on Summit materials (program, invitation, video monitors, etc.)
- Registration for one table with your company on signage
- Company logo & link on website
- Sponsored article/blog, photo and link on social media
- Opportunity to contribute to VIP bag
- Attendee list and mailing addresses

### GOLD

**\$10,000**

- Podium Time to present an Award
- Your logo displayed on Summit materials (program, invitation, video monitors, etc.)
- Registration for 4 people signage
- Company logo & link on website
- Sponsored photo and link on social media
- Opportunity to contribute to VIP bag

### SILVER

**\$5,000**

- Your name displayed on Summit program
- Registration for 2 with your company on signage
- Company name & link on website
- Link on social media
- Opportunity to contribute to VIP bag

### REFRESHMENT SPONSOR

**\$5,000**

- Your name displayed on Beverage Table program
- Company name & link on website
- Opportunity to contribute to VIP bag

### TABLE SPONSOR

**\$1,000**

- Your name displayed on Summit program
- Registration for 2 with company on signage
- Company name on website
- Opportunity to contribute to VIP bag

## SPONSOR REPLY FORM

Yes, I/we want to sponsor the Gift of Life Summit with a gift of:

- Platinum \$20,000
- Gold \$10,000
- Silver \$5,000
- Refreshment Sponsor \$5,000
- Table Sponsor \$1,000

I/We are unable to sponsor the 2019 Gift of Life Summit at this time. Please accept our tax-deductible contribution of \$\_\_\_\_\_ in support of the Gift of Life mission.

Company Name \_\_\_\_\_  
(as you wish it to appear for recognition purposes)

Contact name \_\_\_\_\_ Date \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

I have enclosed a check in the amount of \$\_\_\_\_\_

Please bill me/our company for \$\_\_\_\_\_

Signature \_\_\_\_\_

This pledge form must be received by March 25th, 2019 in order to receive all stated benefits.  
Sponsorship must be paid in full by April 25th, 2019.

Please make check payable and mail to:

Gift of Life Summit  
982 Eastern Parkway  
Box 13  
Louisville, KY 40217

Questions?

Contact Shannon Adkins  
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