



2018 Embassy Suites BWI Airport Meeting Sponsorships

Your support through sponsorship is critical to BHA and the success of our events. As a sponsor this is a great opportunity to invite everyone you know in our industry to this event. We look forward to seeing you in Embassy Suites BWI Airport/Baltimore September 19 & 20, 2018

Sponsorship Levels

The Platinum Sponsorship includes: 10-minute Product Showcase, table top, logo on event promotion & logo & link on the website as a "Platinum Sponsor". *complimentary registration based on membership category

The Gold Sponsorship includes: 5-minute Product Showcase, table top, logo on event promotion & logo & link on the website as a "Gold Sponsor". *complimentary registration based on membership category.

The Silver Sponsorship includes: Special Mention, table top, logo on event promotion & logo & link on the website as a "Silver Sponsor". * 1 complimentary registration included

Reception Sponsorship includes: 5 minute Product Showcase at the Reception , logo on event promotion, logo & link on the website as a "Reception Sponsor", *call for details

A six foot Table top available to all Sponsors for banners, display, material, etc.

Member Categories

Premier Member (Platinum or Gold Sponsorship) = 2 Complimentary Registrations with Sponsorship

Basic Member (at Platinum or Gold Sponsorship) = 1 Complimentary Registration with Sponsorship

Premier or Basic Member (at Silver Sponsorship) = 1 Complimentary Registration with Sponsors

Non-Member Sponsors (excluding Reception Sponsor) = 2 Complimentary Registrations with Sponsorship

FINAL DEADLINE FOR SPONSORSHIPS is Friday, September 7, 2018.

| | Member | Non-Member | <input type="checkbox"/> Check enclosed (payable to <u>BHA</u>) |
|---------------------------------------|------------------|------------|--|
| \$ _____ Platinum | \$900 | \$1350 | <input type="checkbox"/> Charge my Visa / MasterCard |
| \$ _____ Gold | \$700 | \$1050 | Name on card: _____ |
| \$ _____ Silver | \$500 | \$995 | Card #: _____ |
| \$ _____ Reception | Call for Details | | Exp. Date: _____ CSV: _____ |
| \$ _____ Total Amount Enclosed | | | Signature: _____ |

Contact Name: _____

Company: _____

Address: _____

City, State, Zip: _____

Phone #: _____

Email: _____



Return completed form to: BHA | 136 South Keowee Street, Dayton, OH 45402
-OR- **Fax to** (937) 222-5794 | **Call** (800) 245-6292 | info@basementhealth.org

Payment for any sponsorship committed to and not cancelled by above deadline is due in full.