



## Sponsorship Application & Agreement

**Company Info**

Company Name \_\_\_\_\_ Contact Name \_\_\_\_\_

Contact Email \_\_\_\_\_ Contact Cell # \_\_\_\_\_

Co. Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Co. Phone # \_\_\_\_\_ Website \_\_\_\_\_

Company name as it should appear on show materials \_\_\_\_\_

**Sponsorship Options**

All sponsors receive recognition in the event program in addition to listed amenities below.

**\$5,000 Walnut Sponsor**

- Name/logo on entry passes • 100 entry passes • 1/2 page ad in event program
- Primary display on event website and Hard News • Signage on display during event

**\$3,000 White Oak Sponsor**

- 50 entry passes • 1/4 page ad in event program • Signage on display during event
- Name on event website and Hard News

**\$1,500 Cherry Sponsor**

- 25 entry passes • Name on event website and Hard News • Signage on display during event

**\$1,000 Entertainment Sponsor**

- 15 entry passes • Name announced on stage • Signage near entertainment stage

**\$1,000 Competition Sponsor**

- 15 entry passes • Name announced during competition • Signage near competition

**\$750 Carving Sponsor**

- 10 entry passes • Signage near carving area

**Payment Information**

Please enter your credit / debit card payment information below OR indicate if you are sending a check to the OFFICE ADDRESS above. Credit card payments will be processed upon receipt. Mailed checks must be received at our OFFICE ADDRESS above by **FRIDAY, AUGUST 6, 2021.**  Mark here if you are mailing a check

Credit Card # \_\_\_\_\_ Name on Card \_\_\_\_\_

3 or 4 digit Security Code \_\_\_\_\_ Expiration Date \_\_\_\_\_ Billing Zip Code \_\_\_\_\_

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

Approved Brand Opportunities	FOR OFFICE USE ONLY	Remaining Balance Due
_____	Total Amount Due _____	<input type="checkbox"/> Paid By Credit Card
Accepted by _____	- Less Deposit Paid _____	<input type="checkbox"/> Invoiced on _____
Date _____	= Remaining Balance _____	<input type="checkbox"/> Balance Paid on _____



## Program Ad Application & Agreement

**Company Info**

Company Name \_\_\_\_\_ Contact Name \_\_\_\_\_

Contact Email \_\_\_\_\_ Contact Cell # \_\_\_\_\_

Co. Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Co. Phone # \_\_\_\_\_ Website \_\_\_\_\_

Company name as it should appear on show materials \_\_\_\_\_

Full color ads are available in our event program. 5,000 copies will be handed out to attendees.

Ad Description (Design Sizes)	Price	# of ads	Total \$
Outside Back Cover - (Bleed: 4.25" x 8.75")	\$900		
Inside Front Cover - (Bleed: 4.25" x 8.75")	\$700		
Inside Back Cover - (Bleed: 4.25" x 8.75")	\$700		
Full Page - (Bleed: 4.25" x 8.75")	\$650		
Half Page - (4" x 4.25")	\$400		
Quarter Page - (4" x 2")	\$300		

### Printing & Design Specifications

- Digital ads required in either High res PDF or 300 dpi jpg
- Submit ads to lizm@ihla.org
- If you are unable to submit in a digital format, per the specs indicated above, ad design services are available for \$65 / hour.
- **ALL ADS DUE AUGUST 9TH, 2021**

### Payment Information

Please enter your credit / debit card payment information below OR indicate if you are sending a check to the OFFICE ADDRESS above. Credit card payments will be processed upon receipt. Mailed checks must be received at our OFFICE ADDRESS above by

**FRIDAY, AUGUST 6TH, 2021.**  Mark here if you are mailing a check

Credit Card # \_\_\_\_\_ Name on Card \_\_\_\_\_

3 or 4 digit Security Code \_\_\_\_\_ Expiration Date \_\_\_\_\_ Billing Zip Code \_\_\_\_\_

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

Approved Brand Opportunities	FOR OFFICE USE ONLY	Remaining Balance Due
_____	Total Amount Due _____	<input type="checkbox"/> Paid By Credit Card
Accepted by _____	- Less Deposit Paid _____	<input type="checkbox"/> Invoiced on _____
Date _____	= Remaining Balance _____	<input type="checkbox"/> Balance Paid on _____