

2010 Michigan



**HEALTHY
MOTHERS**

**HEALTHY
BABIES**

CONFERENCE

**Growing Strong
Families,
Building Healthier
Communities**

For more information

Please contact:

Diane Drago

Conference Coordinator

517-663-5147

DMSdiane@concentric.net

Web site: www.hmhbmi.org

SPONSOR-EXHIBITOR FACT SHEET

Sponsorship Opportunities

The 2010 Healthy Mothers, Healthy Babies Conference offers a variety of sponsorship opportunities:

- ★ Gold Sponsor: \$5,000 and above
- ★ Silver Sponsor: \$3,000
- ★ Bronze Sponsor: \$1,000
- ★ Speaker Sponsor: Amount TBD
- ★ Tote Bag Sponsor: \$2,000
- ★ Prize Contributor for end-of-conference drawing
- ★ Silent Auction Contributor

All sponsors are guaranteed the following benefits:

- ★ One complimentary registration per \$1,000 of sponsorship
- ★ Complimentary exhibit space (for sponsorship exceeding \$1,000)
- ★ Acknowledgment in marketing materials, if commitment is made prior to publication date
- ★ Acknowledgment in the conference program according to sponsorship level
- ★ Verbal recognition during the conference
- ★ Acknowledgment on signage at appropriate locations at the conference

Special recognitions are provided for:

- ★ **Speaker Sponsor:** Underwrite honoraria and/or travel expenses for a speaker; call 517-663-5147 to discuss fees.
- ★ **Tote Bag Sponsor:** Underwrite the cost of the tote bags distributed to each conference participant. Bags may have the sponsor's name and/or logo, as well as the conference name.
- ★ **Prize Contributor:** Provide a gift valued at \$25 or more for the end-of-conference drawing; acknowledgment will be provided in the program book and/or during the drawing.
- ★ **Silent Auction Contributor:** Provide an item(s) valued at \$25 or more for the Silent Auction fundraiser. Items should be presented ready to display (e.g., in a basket).

Exhibit Opportunities

All exhibits will be displayed on 6-foot skirted tables. Sponsors contributing \$1,000 or more receive a complimentary exhibit table. Exhibits are available for non-sponsors as follows:

- ★ **For-profit Business/Organization Exhibitor: \$500**
Businesses and For-profit organizations (larger than five employees) are invited to exhibit at the conference at the for-profit rate.
- ★ **For-profit Small Business/Organization Exhibitor: \$300**
Small businesses (less than five employees) are invited to exhibit at the conference at a reduced fee. This includes small businesses with merchandise that may be available for sale on-site (jewelry, childrens' toys, books or clothing, etc.).
- ★ **Non-profit organizations: \$75**

***Note:** Exhibit staff attending the conference (who do not qualify for a complimentary registration under the sponsor provisions) must also pay the conference registration fee.*

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SPONSOR-EXHIBITOR COMMITMENT FORM

Please complete this form and return it by mail, fax or e-mail to:

Diane Drago, Conference Manager, Diversified Management Services
620 Hall Street, Eaton Rapids, MI 48827

Voice: 517/663-5147 * Fax: 517/663-5245

E-mail: DMSdiane@concentric.net

Name _____ Title _____

Organization _____

Address _____

City _____ State _____ Zip Code _____

Telephone _____ Fax _____

E-mail _____

Sponsorship

After reviewing the Fact Sheet, please check the sponsorship in which you are interested. Conference management will contact you to confirm and discuss sponsorship arrangements.

- Gold Sponsor—\$5,000 and above
- Silver Sponsor—\$3,000
- Bronze Sponsor—\$1,000
- Speaker Sponsor: Designate speaker:

- Tote Bag Sponsor—\$2,000
- Prize Contributor (Provide description of gift and value of item.)

- Silent Auction Contributor (Provide description and value of item.)

For sponsors contributing \$1,000 or more:

- Yes, we will use the complimentary exhibit table
- No, we will not use the complimentary exhibit table

Exhibit only

Check the appropriate level to purchase an exhibit table. (Applicable only for organizations not sponsoring at \$1,000 or above.)

- For-profit Business/Organization: \$500
- For-profit Small Business/Organizatoin: \$300
- Non-profit Organization: \$75

Payment Information

- Check # _____ is enclosed in the amount of \$ _____. Make check payable to: **Healthy Mothers, Healthy Babies Coalition**
- Please charge my credit card in the amount indicated above. VISA Mastercard

Card number _____

Expiration date _____ Security code _____

Name on card (Print clearly) _____

Billing address _____

Signature _____