



Sponsorship Request Form

General Information

Organization Name: _____

Address: _____

Contact Name & Phone: _____

Contact Email Address: _____

Event Information

Name of Event: _____

Event Purpose/Description:

Sponsorship Request: _____

Previous sponsorship received from Advanced Benefits? <i>Check One:</i>	Yes	No
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If yes, please provide
date/event and
amount received
previously: _____

Deadline for Decision: _____

How were you referred
to Advanced Benefits? _____

Continued on reverse

Partnership Benefits

Please list all sponsorship benefits, included but not limited to: Banners, Program Recognition, Advertisement, Social Media, Speaking Opportunity, Etc.

Attach separate sponsorship form if this information is included.

Is there ability for first right of refusal
in subsequent years?

Check One

Yes

No

Is this an industry exclusive sponsorship?

Check one

Yes

No

How many people do you anticipate
attending this event?

How many people do you anticipate seeing
your advertisement for the event?

What else do you want us to know regarding your event and potential sponsorship?