



## **KASEM CARES CONFERENCE ON AGING**

**April 21-23, 2016**

**Hilton Orange County**

### **SPONSORSHIP OPPORTUNITIES**

Kasem Cares is a nonprofit 501(c)(3) organization dedicated to protecting against elder abuse and isolation through public health education. Your sponsorship of our first Conference on Aging will provide important and needed financial support for a worthy charitable cause, and your tax-deductible sponsorship will provide exposure and name recognition in the community and among health providers and partners, for you.

#### **PLATINUM SPONSOR**

**\$25,000** (1 AVAILABLE)

##### **Premier Sponsorship Benefits Include:**

|   |  |
|---|--|
| Introduction of one Keynote Speaker                                     | Primary placement exhibit table                      |
| Moderator on one panel each day or speaking role on one panel each day* | Organization Name on lanyards                        |
| 10 registrations to conference including VIP reception                  | Organization Name or logo on tote bag                |
| Additional attendee special rate of \$300                               | Recognition in daily program                         |
|   | Recognition on Aging with Dignity Conference webpage |

#### **GOLD SPONSOR**

**\$15,000** (2 AVAILABLE)

##### **Sponsorship Benefits Include:**

|   |  |
|---|--|
| Moderator role on one panel or speaking role on one panel each day* | Key placement exhibit table                          |
| 6 registrations to conference including VIP reception               | Organization Name or logo on tote bag                |
| Additional attendee special rate of \$300                           | Recognition in daily program                         |
|   | Recognition on Aging with Dignity Conference webpage |

## SILVER SPONSOR

**\$7,500** (5 AVAILABLE)

### Sponsorship Benefits Include:

|   |  |
|---|--|
| Speaking role on one panel of your choosing*          | Organization Name or logo on tote bag                |
| 4 registrations to conference including VIP reception | Recognition in daily program                         |
| Additional attendee special rate of \$300             | Recognition on Aging with Dignity Conference webpage |
| Exhibit table   |  |

## BRONZE SPONSOR

**\$1,500**

### Sponsorship Benefits Include:

|  |  |
|--|--|
| 1 registration to conference including VIP reception | Recognition in daily program                         |
| Exhibit table  | Recognition on Aging with Dignity Conference webpage |

## VIP RECEPTION SPONSOR

**\$5,000**

Show your support to our most important attendees by hosting our Thursday evening VIP Party. Sponsorship includes: (1) conference registration and VIP party, (2) signage at VIP event, (3) and recognition on Aging with Dignity Conference webpage.

## BREAKROOM SPONSOR

**\$1,200** (4 AVAILABLE)

Attendees will be grateful for a mid-morning or afternoon snack. Sponsorship includes: (1) conference registration, (2) signage at break table, (3) and recognition on Aging with Dignity Conference webpage.

## NETWORKING SPONSOR

**\$4,000**

Host a Friday night happy hour. Allow attendees to relax and network with colleagues and friends. Sponsorship includes: (1) conference registration, (2) signage at Networking outing, and (3) recognition on Aging with Dignity Conference webpage.

## PROGRAM SPONSORSHIP

|   |         |
|---|---------|
| Program Sponsorship Full Page Color Ad    | \$1,500 |
| Program Sponsorship Half Page Color Ad    | \$1,000 |
| Program Sponsorship Quarter Page Color Ad | \$500   |

### Deadlines and Additional Details

Sponsorship on a first come first serve basis. VIP Sponsorship deadline December 31, 2015. All Sponsorship artwork due by March 1<sup>st</sup> 2016. Please contact your tax professional for additional details on tax deductible donations.

For additional Sponsorship opportunities please contact Alecia Hedge [alecia@kasemcares.com](mailto:alecia@kasemcares.com)

\*Speaking criteria and deadlines apply.

### Sponsorship Consent

Sponsorship Level \_\_\_\_\_ Amount \_\_\_\_\_

Organization Name \_\_\_\_\_

Name as it should appear on printed materials \_\_\_\_\_

Contact Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Address \_\_\_\_\_

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

Email \_\_\_\_\_