

17th Annual Aging Well Conference Sponsor Agreement



Organization Information:

Business Name: _____

Contact Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Email: _____ Phone: _____

Sponsorship Levels:

Presenting Sponsor
\$7,500

Major Sponsor
\$2,500

Dementia Workshops
Sponsor \$1,000

Wellness Workshops
Sponsor \$1,000

Professional Workshops
Sponsor \$1,000

Caregiver Workshops
Sponsor \$1,000

All sponsorships include a booth space.

Will your booth space require electricity? Yes No

If your sponsorship includes registration(s), a LifeStream rep will be in touch prior to May 24.

Booth Space *Only*: \$150 Will your booth space require electricity? Yes No

Your booth space comes with 2 lunch/keynote presentation tickets. Additional tickets are \$25.

Please note: this does not include the full conference breakout sessions. If you wish to attend the full conference you must register as an attendee. A representative must be at your booth from 8am to 11am and again at 1pm to 1:30pm to connect with attendees.

Number of additional lunches: _____ x \$25 = _____

Name of individual(s) at booth space:

Ad Space in Program Book

*Presenting and Major Sponsors
receive complimentary ad space.*

Full Page Ad
\$225

Half Page Ad
\$150

Quarter Page Ad
\$75

Payment:

Invoice

Cash Enclosed

Check # _____ enclosed

Card Payment

**Please note: we do not accept
American Express.**

Card Number: _____

Exp. Date: _____ Security Code: _____