



SPONSORSHIP & EXHIBITOR CONTRACT
25th Annual Hispanic Women's Institutes
Professional Development and Leadership Institute
October 21 and 22, 2010
Phoenix Convention Center SOUTH, Phoenix, Arizona
Forms available online at www.hispanicwomen.org

ORGANIZATION: _____
 (PRINT name as you would like it to appear on any marketing materials)
 CONTACT PERSON: _____ TITLE: _____
 ADDRESS: _____
 CITY/STATE/ZIP: _____
 PHONE: _____ FAX: _____ E-MAIL: _____

SPONSORSHIP SELECTION: Please check the appropriate box below to select a sponsorship level.
 Corporate names to appear on registration materials for sponsorships confirmed by **August 30, 2010**
 All sponsors must be paid in full prior to execution of sponsorship.

- Honorary Sponsor \$100,000 and Above
- Premium Sponsor \$ 75,000
- Diamond Sponsor \$ 55,000
- Platinum Sponsor \$ 40,000
- Gold Sponsor \$ 30,000
- Silver Sponsor \$ 20,000
- Bronze Sponsor \$ 10,000
- Copper Sponsor \$ 5,000
- Other Sponsorship: _____ \$ _____
- Corporate Luncheon Table \$1,500 ea No. _____
- Government/Non-Profit Luncheon Table \$1,000 ea No. _____
- 10' x 10' Corporate Exhibit Booth \$ 1,000 ea No. _____
- 10' x 10' Small Business/Government/Non-Profit Booth \$ 800 ea No. _____
- Full Page Online Program Ad \$800
- Half Page Online Program Ad \$ 400
- Concurrent Workshops (Multiple Co-sponsors per session) \$2,000 Workshop Name: _____
- Full Institutes Registration **Standard Rate** (Expires 8-31-10) \$150/person No. _____
- Full Institutes Registration **Standard Rate** (Expires 10-20-10) \$225/person No. _____
- Full Institutes Registration **On-site Rate** (Begins 10-20-10, 11:00 a.m.) \$275/person No. _____
- Full Institutes Registration **Standard Senior Rate** (62+ yrs with ID) \$120/person No. _____
- Full Institutes Registration **Standard Student Rate** (12 hours+ with ID) \$50/person No. _____

(Registration includes: Concurrent Workshops, Admission to Expo, Admission to Corporate Scholarship Benefit Luncheon, Admission to Fashion Show, Admission to Closing Reception, one official bag and one registration badge)

SILENT AUCTION DONATION:
 Description of Item: _____ Value: _____

TOTAL SPONSORSHIP COMMITMENT \$ _____

EXHIBITOR BOOTH ARRANGEMENTS: Information below must be provided to secure booth.

Exhibit Name: _____
 (Please print company name as you would like it to appear on exhibitor signage)
 Contact Name: _____
 (If different than above contact person)
 Mailing Address: _____
 City/State/Zip: _____
 Phone: _____ Fax: _____ Email: _____

FORM OF PAYMENT: Credit Card Check Please invoice me at address above 30 DAY NET!
 Name of Card Holder: _____
 Credit Card Type: Visa MasterCard American Express Discover
 Account Number: _____ Expiration Date: _____

Signature: _____ **Date:** _____

Fax back this form to HWC MARKETING COMMITTEE at 602-954-7563 (fax)
ATTN: Uzra Vo, 602-432-6673 or Norma Macias 480-452-2867 Email to: marketing@hispanicwomen.org
MAKE CHECKS PAYABLE BY September 15, 2010 TO:
Hispanic Women's Corporation P.O. BOX 20725 Phoenix, AZ 85036-0725
Express Mail Address: 4545 North 36th Street #108 Phoenix, AZ 85018-3473