



SERVING UP SUCCESS
FOR THE COMMUNITY

2019 Sponsorship Donation Form

Event Date: September 26



SPONSORSHIP LEVELS

	Rivermaster "Presenting Sponsor" \$5,000	Ganson Street \$2,500	Six Can \$1,000	Buffalo River \$500	Queen City \$250	Dockside Item/Basket Donation
Prominent recognition at event – signage on main stage, logo on voting cards and banner displayed at venue one month prior to event						
Name mention in article distributed to 150,000 members						
Logo with link on Independent Health Foundation website for one year						
Logo on event tickets and online ticket seller (Brown Paper Tickets) website						
Opportunity to provide branded bags as a takeaway for participants						
Company name and logo featured in all promotions and advertising (radio, TV, print, social media)						
Logo recognition on promotional pieces at local businesses, wineries, breweries, and restaurants						
Prominent recognition on TV screen at event						
Logo with link on Healthy Options website for one year						
Logo on sponsor sign at event						
Opportunity to provide company literature/ promotional items to be placed in swag bags						
Complimentary event tickets	12 TICKETS	8 TICKETS	4 TICKETS	2 TICKETS		
Verbal recognition at event						
Recognition on table tents throughout event	LOGO RECOGNITION	LOGO RECOGNITION	LOGO RECOGNITION	NAME RECOGNITION	NAME RECOGNITION	
Recognition in event program (500 distributed)	INSIDE FRONT COVER AD	FULL PAGE AD	1/2 PAGE AD	1/4 PAGE AD	NAME RECOGNITION	NAME RECOGNITION
Opportunity to make a difference in the lives of children throughout WNY						



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YES, PLEASE COUNT ON OUR SUPPORT!

_____ is proud to sponsor Taps & Apps 2019.

Please check sponsor level:

- | | |
|--|---|
| <input type="checkbox"/> Rivermaster – \$5,000 | <input type="checkbox"/> Buffalo River – \$500 |
| <input type="checkbox"/> Ganson Street – \$2,500 | <input type="checkbox"/> Queen City – \$250 |
| <input type="checkbox"/> Six Can – \$1,000 | <input type="checkbox"/> Dockside Donor – \$_____ |
| <input type="checkbox"/> Item/Basket Donation Description:* _____ Value: _____ | |

Please check one – specify sponsorship vs. donation:

Sponsorship

- Enclosed is a check for our sponsorship made payable to:
Independent Health Foundation, Tax ID#: 16-1417199
- I prefer to be billed at a later date
To pay by credit card, please visit www.healthyoptionsbuffalo.com

Donation

- Please find my donated item enclosed
- Contact me to pick up my donation

For packages including an ad:

- Do not wish to submit ad
- Will submit ad by July 26, 2019. Please email ad to:
foundation@independenthealth.com
- Please use last year’s ad

Please print.

Company Name: _____

Contact Person: _____

Title: _____

Address: _____

City: _____ State: _____ ZIP: _____

Phone: _____ Fax: _____

Email: _____

**Please complete this form by
June 28, 2019 and mail to:**

Taps & Apps
c/o Independent Health Foundation
511 Farber Lakes Drive
Buffalo, NY 14221

Additional contact information:

Phone: (716) 635-4959
Fax: (716) 635-3984
Email: foundation@independenthealth.com

Important dates/deadlines:

June 28: Sponsor commitment and logo to Foundation

July 26: Ad to Foundation for event guide

August 23: Promo items for swag bag must be delivered to the Foundation

* Promotion will be based on value of donation.