

Sponsorship Opportunities

Mental Health Association in Michigan 2019 Tribute Dinner Honoring Congresswoman Debbie Dingell

Friday, October 4

Exhibit Table **\$500**

One six-foot table with linens and two chairs in the pre-function area outside the Plaza Ballroom.

Friend Sponsor **\$500**

Company logo on MHAM website with clickable link, written and verbal mentions at event.

Reception Sponsorship **\$1,000**

Company logo on MHAM website with clickable link, written and verbal mentions at event, one social media posting on Facebook and Twitter and one complimentary event ticket.

Dinner Sponsor **\$2,000**

Exclusive signage, company logo on MHAM website with clickable link, written and verbal mentions at event, two social media postings on Facebook and Twitter and two complimentary event tickets.

Table Sponsor **\$1,250**

Exclusive sponsorship for a dinner table of ten. A \$250 discount.

Sponsor Deadline: Friday, September 13

Reception 6pm 🍷 *Dinner 7pm* 🍷 *Program 8pm*

The Henry Hotel | 300 Town Center Dr. | Dearborn



Sponsor & Exhibitor Application

Deadline: Friday, September 13, 2019

MHAM Annual Tribute Dinner
 October 4, 2019
 The Henry Hotel
 300 Town Center Dr.
 Dearborn, MI

Company: _____

Contact Person: _____

Mailing Address: _____

City, State, Zip: _____

Phone: _____ E-mail: _____

Website: _____ Type of Business: _____

Booth Representative Names: 1. _____ 2. _____

Special dietary or physical requirements _____

Booth Space - Exhibitor Only

- Booth Space: six-foot table with linens \$500
- Additional Booth Space: six-foot table with linens (\$100 each) \$ _____
- Additional Attendee (\$50 each): Name of additional representative _____ \$ _____

Available Sponsorship Opportunities (all sponsorships over \$500 receive one complimentary exhibit booth)

- Friend Sponsor \$500
- Reception Sponsor \$1,000
- Dinner Sponsor \$2,000
- Table Sponsor \$1,250

Total Amount Due \$ _____

PAYMENT METHOD:

(Make all checks payable to MHAM) Check enclosed: \$ _____

Credit Card: Visa MasterCard Discover American Express

Card Number: _____ Expiration Date: _____ CVV: _____

Card Holder (name printed on card): _____

Billing Zip Code: _____

Signature: _____

Mail to: MHAM
 1100 West Saginaw, Suite 1-1B
 P.O. Box 11118
 Lansing, MI 48901
 Ph: 248.464.5019 or 313.641.1109 | F: 517.913.5941
 matthudkins@gmail.com
 www.mha-mi.com

Thank you for your time, consideration and support of the 2019 MHAM Tribute Dinner!
 The above party hereby wishes to apply for the exhibit space/sponsorship at the 2019 MHAM Tribute Dinner. Payment in full is required to reserve vendor spaces and sponsorships. No refunds.