



Master Brewers Conference

Sponsorship Reservation Form

SPONSORSHIP OPPORTUNITIES

| | | |
|--|-----------|----------|
| Ad roll to kick off session | \$3,000 | \$ _____ |
| Attendee gifts | \$5,000+ | \$ _____ |
| Banner ad in pre-conference email | \$2,500 | \$ _____ |
| Banner ad on meeting platform | \$3,000 | \$ _____ |
| Coffee | \$5,000 | \$ _____ |
| Commemorative Master Brewers Conference Beer | \$10,000 | \$ _____ |
| Company registration packages | \$ varies | \$ _____ |
| Daily Email or Notification Sponsor | \$2,500 | \$ _____ |
| Gift cards | \$ varies | \$ _____ |
| Lanyards | \$6,000 | \$ _____ |
| Lunch | \$5,000 | \$ _____ |
| Main stage sponsorship | \$10,000 | \$ _____ |
| Registration Confirmation Email | \$3,000 | \$ _____ |
| Room drops | \$ varies | \$ _____ |
| Session music | \$5,000 | \$ _____ |
| Session sponsorship | \$3,000 | \$ _____ |
| Sponsor networking session | \$3,000 | \$ _____ |
| Sponsor your own session | \$6,000 | \$ _____ |
| Spotlighted networking time | \$3,000 | \$ _____ |
| Swag bag inserts | \$3,000 | \$ _____ |
| Swag bags | \$6,000 | \$ _____ |
| Create your own sponsorship | | \$ _____ |

Sponsorship Packages

| | | |
|----------|-----------|----------|
| VIP | \$20,000+ | \$ _____ |
| Platinum | \$10,000 | \$ _____ |
| Gold | \$5,000 | \$ _____ |
| Bronze | \$2,000 | \$ _____ |

Total Due \$ _____

COMPANY AND CONTACT INFORMATION

Company Name _____

Contact Name _____

Contact Email _____

Telephone _____

Address _____

City _____

State/Province/Country _____

Zip/Postal Code _____

Submit the following information to Rhonda Wilkie:

rwilkie@scisoc.org

- High resolution logo in full color .eps vector or .tif format, 300 dpi, 3x3 inches
- Website URL that the logo will resolve to
- 50-word company description

PAYMENT INFORMATION

Invoice Me

Send me bank wire transfer details

Check enclosed (in U.S. funds and is payable to Master Brewers, drawn only from a U.S. bank)

When you provide a check for payment, you authorize us to use information from your check to make a one-time electronic fund transfer from your account or to process the payment as a check transaction. Funds may be withdrawn from your account the same day we deposit payment and you may not receive your check back from your financial institution.

Charge my credit card (check one below)

American Express Discover MasterCard Visa

Card Number _____

Expiration Date _____
(Month / Year)

Name of Cardholder _____

PAYMENT TERMS

Payment must be received to initiate sponsor benefits and is due within 30 days of sponsorship reservation. Your benefits are outlined in the sponsorship agreement emailed to your contact person. To pay by credit card, please contact Rhonda Wilkie with credit card information: +1.651.994.3820.

PLEASE RETURN THIS FORM TO:

Brianna Plank
3285 Northwood Circle, Suite 100
St. Paul, MN 55121
bplank@scisoc.org or fax: +1.651.454.0766

QUESTIONS?

Brianna Plank
Director, Business Development
+1.651.994.3819
bplank@scisoc.org
mbaa.com

