



## All RDH Celebration Sponsorship Opportunities

To register for a sponsorship, please complete the following form and return with payment to the ODHA office.

► **Individual Full Name** \_\_\_\_\_ **Position Title** \_\_\_\_\_

Company Name (exactly as it should be listed; only ONE company per space) \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Business Phone \_\_\_\_\_ Website \_\_\_\_\_

Email \_\_\_\_\_

### SPONSORSHIP SELECTION:

Support the All RDH Celebration and help provide high energy snacks and refreshments required by the OCC catering contract.

Support Level		
<input type="checkbox"/> <b>\$1000</b> • Logo on Rotating Power Point • Social Media Promotion • Promo Table or Giveaway Opportunity • 3" x 5" Banner Hung	<input type="checkbox"/> <b>\$500</b> • Social Media Promotion • Promo Table or Giveaway Opportunity • 3" x 5" Banner Hung	<input type="checkbox"/> <b>\$250</b> • Promo Table or Giveaway Opportunity • 3" x 5" Banner Hung

**Sponsorship Opportunities Total \$** \_\_\_\_\_

The All RDH Celebration is on Saturday, April 4, 2020, at the Oregon Convention Center. Sponsorships must be paid in full and with a completed agreement form in order to begin. There are no refunds for canceled Sponsorship Packages. Sponsorships will be sold on a first-come, first served basis.

Registrant agrees to grant ODHA and Update Management the right to photograph or video Registrant during participation in the event. Registrant understands that any photographs or recordings may be used by ODHA and Update Management for marketing and promotional purposes, at their sole judgment and discretion, without compensation or credit to Registrant.

### PAYMENT OPTIONS: Fax completed form to 503.253.9172

**Check**-Payable to ODHA (US funds only). A form must be submitted to ODHA to confirm support; the check may follow.

**Card:**  Visa  MasterCard  American Express  Discover

Card # \_\_\_\_\_ Exp. Date \_\_\_\_\_ Amount Authorized \$ \_\_\_\_\_

Name on Card \_\_\_\_\_ Signature \_\_\_\_\_

Card Billing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email card receipt to \_\_\_\_\_ CVV \_\_\_\_\_