



National Kidney Foundation®

Serving Maryland and Delaware



Sponsorship Opportunities:

Presenting Sponsor **\$ 15,000**
(\$14,550 tax deductible)

- 2 Premium Reserved Tables/20 Tickets
- Speaking opportunity at event
- Your company will be acknowledged as a Presenting Sponsor
- Strategic acknowledgement in the marketing and advertising campaign for the event, including the logo inclusion, social media, website, Blog, posters, event tickets, event signage, media ads, and full page print ad in program (commit by 2.15.18)
- Opportunity to offer promotional items to guests
- Recognition in the NKF-MDDE Annual Report
- Valet Parking

Platinum Sponsor **\$ 10,000**
(\$9,775 tax deductible)

- One Premium Reserved Table/10 Tickets
- Acknowledgement from Stage
- Strategic acknowledgement in the marketing and advertising campaign for the event, including the logo inclusion, social media, website, Blog, posters, event tickets, event signage, media ads, and half page print ad in program (commit by 2.15.18)
- Opportunity to offer promotional items to guests
- Reserved Parking

Gold Sponsor **\$ 7,500**
(\$7,275 tax deductible)

- One Premium Reserved Table/10 Tickets
- Strategic acknowledgement in the marketing and advertising campaign for the event, including the logo inclusion, social media, website, Blog, posters, event tickets, event signage, media ads, and half page print ad in program (commit by 2.15.18)
- Opportunity to offer promotional items to guests

Silver Sponsor **\$ 5,000**
(\$4,775 tax deductible)

- One Reserved Table/10 Tickets
- Acknowledgement in the marketing and advertising campaign for the event, including the website, posters, event signage, media ads, and quarter page print ad in program (commit by 2.15.18)

Bronze Sponsor **\$ 2,500**
(\$2,277 tax deductible)

- One Table/10 Tickets
- Company name featured in event program
- Company name featured in event presentation

Mission Sponsor **\$ 1,000**

- Fund 5 Patients—Signage

Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ Fax _____

Email Address _____

I would like to sponsor the event:

Sponsorship Level _____

Company Name _____

I would like to purchase individual tickets for the event:

Individual Tickets are \$100 per person

Tickets _____ x \$100 = \$ _____

Enclosed is a check in the amount of \$ _____
made payable to National Kidney Foundation Serving Maryland & Delaware

Please send me an invoice

Please charge my: American Express Visa
 MasterCard Discover

Card Number _____

Expiration Date _____ Security Code _____

Authorized Signature _____

Your sponsorship contribution is tax-deductible to the fullest extent allowed by law. Tax ID# 13-1673104

For more information please contact:

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