



2016 HALLOWEEN EXTRAVAGANZA SPONSORSHIP FORM

I/We would be pleased to sponsor the ACTSS Halloween Extravaganza on Saturday, October 29, 2016.

LIFESAVER SPONSOR (Event Sponsor)

Investment: \$5,000

****PRESENTING PARTNER: UA LOCAL UNION 488**

****Only 1 partnership available for this category****

Benefits to you include:

- Premier seating for a corporate table of Ten (10) with a highly prominent table position
- Dinner with one (1) bottle of champagne and two (2) bottles of wine at your corporate table
- Recognition as the presenting sponsor on all print material including paid advertisements
- Your logo and name plus a link to your website on our website's homepage for 1 year
- Recognition as the event sponsor on all event social media including Facebook, Twitter and Instagram
- Full page advertisement in the event program and your logo on the front page
- Logo signage in a prominent location at the event
- Acknowledgement of your support by Master of Ceremonies at the start of the event
- Complimentary ad space in our spring newsletter (our event recognition issue) including your logo
- Sponsorship gift with framed certificate of recognition
- A complimentary SWAG item will be provided for all guests with your logo in conjunction with the ACTSS logo
- Complimentary ACTSS annual membership
- Charitable tax receipt in the amount of \$3500

HERO SPONSOR

Investment: \$2,500

Benefits to you include:

- Premier seating for one (1) corporate table of Ten (10) in a prominent position
- Two (2) bottles of wine at your corporate table
- Recognition of your sponsorship level in the event program
- Acknowledgement of your support by Master of Ceremonies during the evening
- Corporate signage with logo at your table and on large screen
- Recognition of your sponsorship level on all event social media including Facebook, Twitter and Instagram
- One half (1/2) page advertisement in the event program
- Option to provide your business cards for guest's swag bags
- Complimentary ACTSS annual membership
- Charitable tax receipt in the amount of \$1500

AMBASSADOR SPONSOR

Investment: \$1000

Benefits to you include:

- Four (4) tickets to the event
- Your logo and level of sponsorship on our website's event page for 1 year
- Recognition of your sponsorship level in the event program
- Logo signage at the event
- Corporate signage with logo at your table and on large screen
- Acknowledgement on our Facebook Event Page
- Charitable tax receipt in the amount of \$800

INSPIRATION SPONSOR

Investment: \$600

Benefits to you include:

- Two (2) tickets to the event
- **Prominent** logo signage at the event tied into our decor
- Recognition of your sponsorship level in the event program and on large screen
- Acknowledgement of your support by Master of Ceremonies during the evening
- Your logo and level of sponsorship listed on our website's post-event page
- Charitable tax receipt in the amount of \$500

___FRIEND SPONSOR (Table Sponsor)

Investment: \$500

Benefits to you include:

- Two (2) tickets to the event
- Recognition of your sponsorship level in the event program
- Logo signage at the event
- Your logo and level of sponsorship listed on our website’s post-event page
- Corporate signage with logo on the table and your **option** to **“NAME YOUR TABLE”** (eg. In honor of a pet, person, etc)
- Charitable tax receipt in the amount of \$400

___VOLUNTEER SPONSOR

Investment: \$420

(Our volunteers work very hard at the Halloween Extravaganza so show your appreciation by providing them with a meal!)

Benefits to you include:

- Two (2) tickets to the event
- Recognition of your sponsorship level in the event program
- Logo signage at the event
- Your logo and level of sponsorship listed on our website’s post-event page
- Charitable tax receipt in the amount of \$320

To receive full benefits for your generous support, the **deadline is October 1, 2016.**

We welcome sponsors up until October 15 but cannot guarantee full benefits past our deadline.

Your Full Name: _____

Company Name (if applicable): _____

Mailing Address: _____ Postal Code: _____

Phone Number: _____ Email Address: _____

Please Mail Completed Form and Payment (Cheque/Money Order) To:

Animal Cancer Therapy Subsidization Society

162 Bonnie Doon Shopping Centre, PO Box 68224 Bonnie Doon RPO Edmonton, AB T6C 4N6

IF PAYING BY **CREDIT CARD**, please complete the info below and mail it to the address noted above or, you may scan and email it to execdirector@actssalberta.ca

Type of Credit Card: Visa MasterCard Amex

Name of Cardholder: _____

Credit Card #: _____

Verification Code (last 3 digits on **back** of your card): _____

Expiry: _____ / _____ Signature: _____
(Month) / (Year)

Thank you for your contribution and helping pets LIVE with cancer!

OFFICE USE ONLY: LOGO RECEIVED