



2017 SPONSORSHIP FORM

Workforce Investment – \$3,000

- Company logo on the web page of SACCD
- Logo on front screen of the SACCD app
 - An ad in the app for participants & vendors to view
 - Link to company website
- 20x20 Ft booth space for two day event
- Company banner hung at front entrance of event
- Company listed on t-shirt distributed to all students
- Company logo on ALL sponsorship collateral

Jobsite – \$2,000

- Company logo on the web page of SACCD
- An ad in the SACCD app
- 20x20 Ft booth space for two day event
- Company banner hung at front entrance of event
- Company logo on ALL sponsorship collateral at event, mail correspondence & any e-mail

The Crew – \$1,000

- Company logo on the web page of SACCD
- 20x20 Ft Booth space for two day event
- Company Logo on ALL sponsorship collateral

Transportation – \$500

- Company logo on the web page of SACCD

Vendor Booths

- \$250 - 20x20 Ft Booth space for two day event
- \$150 - 20x20 Ft Booth space for two day event (Registered nonprofits ONLY)

In addition to your monetary support, we also ask you donate event volunteers. Sponsoring companies please provide logos in high-resolution .jpeg format for promotional materials.

Complete the lower portion of this form. The form is processed by Southern Arizona Construction Career Days, 1842 West Grant Road, Suite 103, Tucson, Arizona 85745. If you have, any questions please e-mail ramon@movingoureconomy.org.

SUGGESTED SPONSORSHIP: Please check which level you wish to sponsor

- | | |
|---|------------|
| <input type="checkbox"/> Workforce Investment | \$3,000.00 |
| <input type="checkbox"/> Jobsite | \$2,000.00 |
| <input type="checkbox"/> The Crew | \$1000.00 |
| <input type="checkbox"/> Transportation | \$500.00 |
| <input type="checkbox"/> General Donation | \$ _____ |

VENDOR BOOTHS

- | | |
|--------------------------------------|---------------------------------------|
| <input type="checkbox"/> Businesses | \$250.00 |
| <input type="checkbox"/> Non Profits | \$150.00 (registered nonprofits ONLY) |

Name: _____ Title: _____

Company Name: _____ Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____ Email: _____

Payment (choose one) Note: A Receipt will be sent to the email address above once your payment is processed.

A Check Payable to SACCD, is being sent Please Invoice me: VISA MasterCard AMEX

Card Number: _____

Name on card: _____ Billing Zip Code: _____

Expiration Date: _____ CVC: _____ Signature: _____