

SOUTH TAMPA CHAMBER  
HEALTH CARE

# SPOTLIGHT AWARDS

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## SPONSOR PLEDGE FORM

Thank you for your interest in taking an active roll in the 2010 South Tampa Chamber of Commerce Healthcare Spotlight Awards. Your generous sponsorship of this event will help defray costs and go a long way toward helping us recognize and honor the "Unsung Heroes" of the healthcare industry in the Tampa Bay area.

**TITLE SPONSOR**  
**\$6,000**

Your company name will be featured in the title of the event on all public exposures and will appear on all awards. A representative from your company will be invited to be on stage for the presentation of the Awards, and you will receive all the added benefits of the Event Sponsor.

**EVENT SPONSOR**  
**\$3,000**

Your company will be highlighted from start to finish as an "Event Sponsor", and your company name and/or logo will be featured in all marketing and publicity materials, including media and web outlets. You will also receive:  Full-page recognition in event program  A table for 8 guests at the Banquet  Special recognition and introductions at the Banquet  Rights to maintain event sponsorship in future years

**AWARD SPONSOR**  
**\$1,500**

One of the presented Awards will bear your company name (e.g., "The Smith Medical Supply Nurse of the Year Award"). Your company will be featured in all marketing and publicity materials. You will also receive:  Half-page recognition in Event Program  A Table for 8 guests at the Banquet  Special recognition and introductions at the banquet  Rights to maintain event sponsorship in future years

**TABLE SPONSOR**  
**\$800 FULL TABLE / \$400 HALF TABLE**  
**CHAMBER MEMBERS \$700 / \$350**

A Table for 8 guests at the banquet  
 Recognition at the Banquet  
 Company name in Event Program and on Table Signage

Contact Name \_\_\_\_\_

Sponsoring Organization (if applicable) \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ ST \_\_\_\_\_ Zip \_\_\_\_\_

Best Contact Phone \_\_\_\_\_ Alternate Phone \_\_\_\_\_

E-Mail \_\_\_\_\_ Web \_\_\_\_\_

Authorized Signature \_\_\_\_\_