

**Delaware HIV Consortium**  
**13th Annual WOW Awards Celebration: Friday, MAY 12, 2017**  
**Sponsorship Opportunity Form**

<b>WOW Presenting Sponsor \$10,000</b>	<ul style="list-style-type: none"> <li>• Three VIP reserved tables of eight</li> <li>• Exclusive full page advertisement on back cover of <b>WOW</b> program book</li> <li>• Sponsorship recognition in press release and logo on print materials</li> <li>• Premier recognition throughout the evening</li> <li>• Acknowledgment in agency newsletter and on agency website</li> </ul>
<b>WOW Gold Sponsor 5,000</b>	<ul style="list-style-type: none"> <li>• Two VIP reserved tables of eight</li> <li>• Prominent, full page advertisement in <b>WOW</b> program book, logo on print materials</li> <li>• Prominent recognition throughout the evening</li> <li>• Acknowledgment in agency newsletter and on agency website</li> </ul>
<b>WOW Silver Sponsor \$2,500</b>	<ul style="list-style-type: none"> <li>• One VIP reserved table of eight</li> <li>• Half page advertisement in <b>WOW</b> program book, logo on print materials</li> <li>• Recognition throughout the evening</li> <li>• Acknowledgment in agency newsletter and on agency website</li> </ul>
<b>WOW Table Sponsor \$1,250</b>	<ul style="list-style-type: none"> <li>• One reserved table of eight</li> <li>• Acknowledgement of sponsorship in program booklet</li> <li>• Complimentary half page advertisement in program</li> </ul>
<b>WOW Advertising Sponsor \$500 / \$250 / \$125</b>	<ul style="list-style-type: none"> <li>• Full page - \$500</li> <li>• Half page - \$250</li> <li>• Quarter page - \$125</li> <li>• Ads must be supportive of the Delaware HIV Consortium or Award recipients</li> <li>• PDF or JPEG ad submissions must be emailed to <a href="mailto:smackenzie@delawarehiv.org">smackenzie@delawarehiv.org</a> by <b>April 1, no exceptions.</b></li> </ul>

**I will sponsor the 2017 WOW Awards Celebration at the following level:**

Presenting Sponsor     Gold Sponsor     Silver Sponsor     Table Sponsor     Ad Sponsor

Contact Name & Title: \_\_\_\_\_

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Payment Method: Check Enclosed: \_\_\_\_\_ Check Forthcoming: \_\_\_\_\_ (Payable to *Delaware HIV Consortium*)

**Sponsorship/Table purchases can be made using a Credit Card at [www.delawarehiv.org](http://www.delawarehiv.org)**  
 Your gift may be made as a pledge, installments, or deferred payment by calling Scott MacKenzie at 302-654-5407.