

CBOF53 SPONSORSHIP COMMITMENT FORM

Company/Organization		
Billing Contact Person (first and last name)		
Billing Contact Title		
Billing Address		
City	State	Zip
Telephone ()	Fax ()	Email
<input type="checkbox"/> C1-NMSDC CERTIFIED MINORITY BUSINESS		
<input type="checkbox"/> C2-NON-NMSDC CERTIFIED BUSINESS, AFFILIATE, PARTNER, GOV'T		Date Submitted
<input type="checkbox"/> C3-CORPORATE MEMBER <input type="checkbox"/> C4-CORPORATE, NON-MEMBER		Date Received:

LEVEL SPONSORSHIP	BY 2-17-2020	AFTER 3-20-2020	AMOUNT
Benefactor Sponsor (exhibitor)	\$35,000	\$35,000	
Diamond Sponsor (exhibitor)	\$25,000	\$25,000	
Platinum Sponsor (exhibitor)	\$15,000	\$15,000	
Gold Sponsor (exhibitor)**	\$10,000	\$10,000	
Silver Sponsor (non-exhibitor)	\$5,000	\$5,000	
Copper Sponsor (non-exhibitor)	\$3,000	\$3,000	
CUSTOM WISH LIST SPONSORSHIP			
Description:			
Description:			
ADDITIONAL EVENT TICKETS			
Full Conference (per person)+	\$850	\$940	
Workshops (+ lunch)	\$125	\$145	
ChicagoMSDC Gala	\$350	\$400	
Sponsors Breakfast	\$200	\$225	
Trade Fair (walkthrough)	\$200	\$225	
RESERVED TABLES			
ChicagoMSDC Gala – Reserved Table (10 Seats)	\$3,500	\$4,000	
Sponsors Breakfast - Reserved Table (10 Seats)	\$2,000	\$2,250	
EXHIBITOR REGISTRATION			
Standard Exhibitor Booth Space			
C1 NMSDC MBEs	\$1,000	\$1,250	
C2 Other Suppliers, Affiliates, Gov't	\$1,250	\$1,500	
C3 Corporate Member	\$1,500	\$1,850	
C4 Corporate Non-Member	\$1,750	\$2,050	
Exhibitor Booth Space (Expansion) per 10x10'	\$850	\$850	
RESOURCE GUIDE ADVERTISING			
Inside Front Cover (8.5"x11")	\$2,750	\$2,750	
Inside Back (8.5x11")	\$2,500	\$2,500	
Full Page (8.5"x11")	\$2,000	\$2,000	
SPONSORSHIP TOTAL			

*Pay by certified check, money order or credit card. Make checks payable to the Chicago Minority Supplier Development Council. Discounted fees do not apply to sponsorship. **Gold Sponsors returning from 2019 are eligible for \$7,500 fee.

FOR OFFICE USE ONLY
Date Recv'd:
Processed by:
Logo Verified:

I agree to the selected sponsorship and my company will honor our financial obligation associated with this selection. My company will not communicate our sponsorship as an endorsement of our products/services. I understand the sponsorship policies and deadlines. I have submitted/verified our logo. I have the authority to make this financial commitment on behalf of my company.

Full Name (please print): _____

Title: _____

Phone: _____ Email: _____

Signature: _____ Date: _____

SPONSORSHIP PAYMENTS ARE NON-REFUNDABLE COMMITMENTS. Sponsorship is based on availability. All sponsorship commitments must be received by **March 2, 2020** for inclusion in the printed Resource Guide and Sponsors Wall. Sponsors submitting commitment forms or payments after March 2, 2020 accept risk of being excluded from marketing, listings, and published recognition. Please return your completed form to Cynthia Jordan, Director of Events, by e-mail: cjordan@chicagomsdc.org or by fax (312) 755--8892.