

Iris House
Fifth Annual *Women as the Face of AIDS* Summit
Thursday, June 24; Saturday, June 26

Community Sponsorships
(Available for Non-Profit Organizations and Small Businesses)

○ Community Friend

Commitment: \$1,000

- Quarter (1/4) Page Ad in Summit Program
- On-stage recognition on each of the Summit's two days
- Listing on Sponsorship Signage at Summit
- Listing on Email Blasts
- Listing on website promoting Summit
- Vendor Table at Summit
- Admission for 10 people, staff and/or clients

○ Community Supporter

Commitment: \$400

- Business Card Ad in Summit Program
- On-stage recognition on each of the Summit's two days
- Listing on Sponsorship Signage at Summit
- Listing on Email Blasts
- Listing on website promoting Summit
- Vendor Table at Summit
- Admission for 5 people; staff and/or clients

**Tables in the exhibit hall are available at \$100 for one day or \$175 for both
(There is no program recognition with this option)**

Summit Program Ads

Summit Programs will be distributed to all attendees and sponsors.

Ads should be submitted as either WORD or PDF or JPEG file to krichardson@irishouse.org no later than May 24 2010.

Ad	Ad Dimensions	Price
○ Full Page	7 ½ inches wide x 10 inches high	\$1,250
○ ½ Page	7 ½ inches wide x 5 inches high	\$750
○ ¼ Page	3 ¾ inches wide x 5 inches high	\$500
○ Business Card Ad	3 ¾ inches wide x 2 ½ inches high	\$200

Iris House
Fifth Annual Women as the Face of AIDS Summit
Community Level Sponsorships
(Available for Non-Profit Organizations and Small Businesses)

Reply Form

My organization will purchase:

A **Sponsorship** in the amount of \$_____.

A **Program Ad** only in the amount of \$_____.

A **Table** only for **two days** at \$175_____

A **Table** only for **one day** at \$100____; Please choose Thursday 6/24____ or Saturday 6/26____

Please print your contact information:

Name: _____

Organization: _____

Address: _____

City, State, Zip: _____

Phone: _____ Email: _____

Payment options

- A check, made payable to Iris House, is enclosed
- My credit card # is _____; Security code_____
Exp. Date_____
- Please bill me_____

Note: to place your ad in the **Summit program**, **payment in full** must be received **by May 24**, along with the ad copy; to **table**, **payment in full** must be received **by June 14**.

For more information, contact Kimberly Richardson at 646 548-0100 ext. 221 or krichardson@irishouse.org