

Partnership Commitment Form

Sponsorship and Exhibit Opportunities for unrestricted educational grants

Please return this form by email to Lisa Lipowski, BSc, CMP – Event Manager: info@CanSAGE.org

Contact Information – Company or Organization (as it will appear in promotional material)

Company / Organization Name:				
Contact Name:				
Contact Title / Position:				
Billing Address - Street:				
City:	Province / State:		Postal Code:	
Phone (office):		Phone (cellular):		
Email:				
Web URL:				
Partnership level: □ Platinum	□Gold	□Silver	□Bronze	
Complete the table and total your com	mitment (First-cor	me, first-served)		
ITEMS SELECTED			ITEM AMOL	JNT
Base commitment			\$	
			\$	
			\$	
			\$	
			\$	
TOTAL:			\$	

Note: To increase participant engagement, each exhibit booth is asked to donate a gamification prize and to provide 3 questions with short answers for the CanSAGE4 mobile application. Winners and prizes will be announced in the exhibit hall during the Saturday afternoon break.

Payment – Upon receipt and approval of your sponsorship selections, an invoice will be issued to the contact person entered on this form. Payment (CAD or USD) may be made by cheque or bank transfer to CanSAGE.

Questions? Please contact: Lisa Lipowski, BSc, CMP – CanSAGE Secretariat, c/o Curly Dog Communications Inc. info@CanSAGE.org | +1-866-661-0880 x1