

Corporate Sponsorship Packages

PLEASE SELECT ONE SPONSORSHIP PACKAGE BELOW

All sponsors at the levels below are acknowledged in the following: Promotional materials; Video display at event; and Invitations. Note: sponsorships must be submitted by August 25, 2023 to be included in invitations.

Presenting Sponsor **\$50,000+**

- Special acknowledgment at the Breakfast
- Front row seats for ten guests plus access to livestream
- 30-second video shout-out via social media
- Your corporate logo on website, invitations, & Breakfast newsletters
- Prime location for a full-page ad in event program

Platinum Sponsor **\$30,000+**

- Special acknowledgment at event & 15-second video shout-out via social media
- VIP table with high priority seating for ten guests plus access to livestream
- Your corporate logo on website, invitations, & Breakfast newsletters
- Full-page ad in event program

Emerald Sponsor **\$15,000+**

- Acknowledgment at event and on social media
- VIP table with high priority seating for ten guests plus access to livestream
- Your corporate logo on website & Breakfast newsletters
- Full-page ad in event program

Gold Sponsor **\$12,000+**

- VIP table with high priority seating for ten guests plus access to livestream
- Your corporate logo on website & Breakfast newsletters
- Full-page ad in event program
- Mention in HLA social media outlets

Silver Sponsor **\$6,000+**

- VIP table with prime seating for ten guests plus access to livestream
- Your corporate logo on website & Breakfast newsletters
- Half-page ad in event program
- Mention in HLA social media outlets

Bronze Sponsor **\$3,000+**

- Table with seating for ten guests plus access to livestream
- Quarter-page ad in event program
- Mention in HLA social media outlets

Yes! We want to sponsor HLA's 28th Benefit Breakfast at the
\$_____ amount.

I will pay via QR code or at www.healthlawadvocates.org/breakfastdonate

My check payable to Health Law Advocates is enclosed

Please accept our pledge and send an invoice

Company Name (*Donation listed as*): _____

Name of Company Contact: _____

Phone: _____ Email: _____

Address: _____

Scan to
Sponsor



Scan, fax or mail this form to:

Health Law Advocates
ATTN: Jennifer Javier
1 Federal St., 5th Floor
Boston, MA 02110

Phone 617.275.2881

Fax 617.338.5242

E-mail jjavier@hla-inc.org

Individual Sponsorship Packages

PLEASE SELECT ONE SPONSORSHIP PACKAGE BELOW

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<p>Grand Patron \$25,000+</p> <ul style="list-style-type: none"> Special acknowledgment at the Breakfast VIP table with high priority seating for ten guests plus access to livestream Acknowledgement in newsletters throughout the year Your name on HLA website, invitation, and full-page ad in event program 	
<p>Patron \$15,000+</p> <ul style="list-style-type: none"> Special acknowledgment at the Breakfast VIP table with high priority seating for ten guests plus access to livestream Your name on HLA website and Breakfast newsletters Full-page ad in event program 	<p>Champion \$10,000+</p> <ul style="list-style-type: none"> VIP table with high priority seating for ten guests plus access to livestream Your name on HLA website and Breakfast newsletters Full-page ad in event program
<p>Benefactor \$6,000+</p> <ul style="list-style-type: none"> VIP table with prime seating for ten guests plus access to livestream Your name on HLA website and Breakfast newsletters Half-page ad in event program 	<p>Advocate \$3,000+</p> <ul style="list-style-type: none"> Table with prime seating for ten guests plus access to livestream Your name on HLA website and Breakfast newsletters Quarter-page ad in event program
<p>Partner \$1,000+</p> <ul style="list-style-type: none"> Four tickets to the Breakfast plus access to livestream Your name on HLA website and Breakfast newsletters Acknowledgement in event program 	<p>Friend \$500+</p> <ul style="list-style-type: none"> Two tickets to the Breakfast plus access to livestream Acknowledgement in event program and Breakfast newsletters

Yes! We want to sponsor HLA's 28th Benefit Breakfast at the \$_____ amount.

- I will pay via QR code or at www.healthlawadvocates.org/breakfastdonate
- My check payable to Health Law Advocates is enclosed
- Please accept our pledge and send an invoice

Name (*Donation listed as*): _____

Phone: _____ Email: _____

Address: _____



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