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| 2019 WCAHA Sponsor Application |  |

Applicant Information

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| --- | --- |
| Company Name |  |
| Contact Name |  |
| Address |  |
|  |
| Phone Number |  |
| Fax Number |  |
| E-Mail Address |  |
| Website Address |  |

## Sponsorship Levels

|  |  |  |
| --- | --- | --- |
| **Standard** | **Enhanced** | **Premium** |
| Includes:   * Business card sized ad in quarterly newsletter * Ad on WCAHA website with link to website and email * Invitation to attend WCAHA fall social * Invitation to present at one Round Table Meeting | Includes:   * All standard sponsorship benefits * Access to WCAHA Membership Directory * Half page advertisement in quarterly newsletter * Table space to display info and attend at WCAHA Fall Social | Includes:   * All standard and enhanced sponsorship benefits * Opportunity to present at Annual Member Meeting * Expanded WCAHA Membership Directory * 2 members of your business may attend all WCAHA events * Priority presentation and speaking engagements at WCAHA events |
| **☐Standard $300/Annual ☐ Enhanced $500/Annual ☐ Premium $1000/Annual**  **☐** I would be interested in speaking at a Round Table Meeting | | |

**Please enclose a business card (to be used in advertisements)**

Note: card will be reproduced for the newsletter. It may not appear exactly as given, but we will try to make it as close as possible.

Signature Date

WCAHA

620 S. FRANKLIN ST. SUITE B18

WEST CHESTER, PA 19382

Make Checks Payable to: