**Date of Conference: September 8th to 10th, 2024**

**Location: Marriott Capitol Hill, Prattville, Alabama**

**www.aldisabilityconference.org**

**SPONSORSHIP & EXHIBITOR PROPOSAL**

The Alabama disABILITY Conference brings together hundreds of individuals with disabilities, caregivers and professionals to share best practices, provide training and inspire innovation and networking among attendees. The continued success of this annual event depends on generous sponsorships and donations from committed businesses, organizations, and other supporters. For a detailed summary of the events happening within the conference, visit www.aldisabilityconference.org.

A blue and white logo

Description automatically generated

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  |  | | |  | | | **SPONSORSHIP OPPORTUNITIES** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Benefits** | | | **Presenting Conference Sponsor $5,000** | | | | | | **Reception Sponsor Sunday**  **$2500** | | **Awards Event Lunch Sponsor**  **Monday**  **$3500** | | | | **Closing Lunch Sponsor**  **Tuesday**  **$3500** | | | | | **Awards Sponsor**  **Monday**  **$3000** | | | | **Event App Sponsor**  **$3000** | **Goodie Bag Sponsor**  **$1200** | | **Breakout Speaker Sponsor $1000** | **Coffee Break Sponsor $1000** | | | | **Bingo Card**  **Sponsor $700** | | **Hospitality Suite Sponsor $500** | **Name badge Sponsor $500** | **Good Bag Insert Sponsor $100** |
| Complimentary Exhibitor Booth ($500 value) | | | Entry to Exhibit Foyer | | | | | | X | | X | | | | X | | | | | X | | | | X |  | |  |  | | | |  | |  |  |  |
| Complimentary Registrations ($250 value each) | | | 2 | | | | | | 1 | | 2 | | | | 2 | | | | | 2 | | | | 2 |  | |  |  | | | |  | |  |  |  |
| Meals Included | | | Included with comp. registration | | | | | | Included with comp. registration | | Included with comp. registration | | | | Included with comp. registration | | | | | Included with comp. registration | | | | Included with comp. registration |  | |  |  | | | |  | |  |  |  |
| Collateral specific to sponsored event; materials provided by sponsor | | | All events | | | | | | Reception & Goodie Bags | | Statewide Awards Lunch & Goodie Bags | | | | Closing Lunch &  Goodie Bags | | | | | Closing Lunch &  Goodie Bags | | | | Closing Lunch &  Goodie Bags | Goodie Bags | | Breakout Speaker Room & Goodie Bags | Coffee Table & Goodie Bags | | | | Bingo Card & Goodie Bags | | Goodie Bags | Goodie Bags | Goodie Bags |
| Goodie Bags | | | X | | | | | |  | |  | | | |  | | | | |  | | | |  | X | |  |  | | | |  | |  |  |  |
| Press releases | | | X | | | | | | X | | X | | | | X | | | | | X | | | | X | X | | X | X | | | | X | | X | X | X |
| Social media | | | X | | | | | | X | | X | | | | X | | | | | X | | | | X | X | | X | X | | | | X | | X | X | X |
| Website | | | X | | | | | | X | | X | | | | X | | | | | X | | | | X | X | | X | X | | | | X | | X | X | X |
| Conference Signage | | | X | | | | | | X | | X | | | | X | | | | | X | | | | X |  | |  |  | | | |  | |  |  |  |
| Advertisement Size in Program | | | Full page | | | | | | Quarter page | | Half Page | | | | Half Page | | | | | Half Page | | | | Half Page | Business Card | | Business Card | Business Card | | | | Listing | | Listing | Listing | Listing |
| Goodie Bag insert (provided by sponsor) | | | X | | | | | | X | | X | | | | X | | | | | X | | | | X | X | | X | X | | | | X | | X |  | X |
|  |  | | |  | | | **Program Ads Only** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Size of Ad** | | | Full Page 8x9.75 (wxh) | | | | | | Half Page  H 8 x 4.5 (wxh) or V 3.5x9.75(wxh) | | | | | |  | | |  | | | | Quarter Page  3.5 x 4.5 (wxh) | | | | | | Business Card  3.5 x 2 (wxh) | | | | | |  | Program Listing | |
| **Rate** | | | $1000.00 | | | | | | $750.00 | | | | | |  | | |  | | | | $400.00 | | | | | | $200.00 | | | | | |  | $100.00 | |
|  |  | | |  | | | **EXHIBTOR BOOTH – THEME: Statewide Connections** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | **Non-Profit Exhibitor** | | |  | |  | | | | **For-Profit Exhibitor** | | | | | | | | | | | | |  | | | **Self-Advocate Entrepreneur** | | | |
| Table Set Up is Monday 4p-6p and Tuesday 7a-9a. One Tuesday awards lunch is provided per exhibitor table | | | | | | | | $300 | | |  | |  | | | | $500 | | | | | | | | | | | | |  | | | $50 | | | |
|  |  | | |  | | | A blue and white logo  Description automatically generated  **Sponsorship and Exhibitor Agreement**  **Inserts for goodie bags and handouts for events must be provided by the sponsor (see sponsor levels)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | | |  | | | **Company/Agency Name** *(Please print names as they should appear in event publications)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | | |  | | | **Address:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **City:** | | | | | | | | | | |  | |  | | | | **State:** | | | | | | | | | | | | |  | | | **Zip:** | | | |
|  | **Contact Name:** | | | | | | | | | | | | | | | | | | | | | | |  |  | **Phone:** | | | | | | | | | | |
|  | **Contact Email:** | | | | | | | | | | | | | | | | | | | | | | |  |  | **Fax:** | | | | | | | | | | |
|  |  | | |  | | | **Website Address:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | | |  | | | **Products or services your company/agency promotes:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | | |  | | | **Please describe special accommodation needs, if any:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | |  | | | |  | | | |  | |  | |  | | | | | **We wish to participate as a *(check all that apply)*:** | | | | | | | | | | | | | | | | | |
|  | **SPONSOR** | | | | | | | | | | | | | | | | | | | | | | |  |  | **PROGRAM ADVERTISEMENT** | | | | | | | | | | |
|  | Presenting Sponsor (Entire Conference) $5,000    Welcome Reception Sponsor $2,500  Monday Awards Luncheon Event Sponsor $3,500  Awards Sponsor $3,500    Tuesday Closing Lunch Event $3,500  Event App Sponsor $3,000    Goodie Bag Sponsor $1200  Breakout Speaker Sponsor $1000    Coffee Break Sponsor $1000  Bingo Card Sponsor $700    Hospitality Suite Sponsor $500  Name Badge Sponsor $500    Goodie Bag Insert Sponsor $100 | | | | | | | | | | | | | | | | | | | | | | |  |  | Program Advertisement  \_\_Full Page $1000  \_\_Business Card $200  \_\_Half Page $750  \_\_Listing $100  \_\_Quarter Page $400 | | | | | | | | | | |
|  |  |  | **EXHIBITOR TABLE** | | | | | | | | | | |
|  |  |  | For-Profit Exhibitor $500  Non-Profit Exhibitor $300  Self-Advocate Entrepreneur $50 | | | | | | | | | | |
|  |  | | |  | | | **Names of ALL exhibit attendees:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | | |  | | | **Please specify additional meals by indicating number of meals needed:**  **Monday Awards Lunch $50.00 \_\_\_\_\_\_\_ Tuesday Closing Lunch $50.00 \_\_\_\_\_\_\_**  (NOTE: Check Sponsor/Exhibit package to determine meals already included in package) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Total Sponsor Fees:** | | | | | **Total Ad Fees:** | | | | | | **Total Exhibitor Fees:** | | | | |  | | | | |  | | **Total Additional Meals:** | | | | | |  | | **TOTAL PAYMENT INCLUDED WITH THIS APPLICATION** | | | | | |
|  |  | | |  | | | **All** **fees must be paid in full and received by August 1, 2024** to ensure appropriate level of marketing based selected package.  **All LOGOS must be emailed in .jpg format no later than August 1, 2024.** Exhibits should be set up no later than **6pm,** **Sunday, September 8th.** Fees are NOT refundable after **August 1, 2024**. Exhibit spaces are first come, first serve except for the Presenting Sponsor booth space. For assistance with sponsorships & exhibits contact Delshonda Thomas at 205-556-7900. All checks should be made payable to The Arc of Alabama; in the memo section list “Conference 2024.”  For assistance, email [delshonda@thearcoftuscaloosa.org](mailto:delshonda@thearcoftuscaloosa.org) or call Delshonda at 205-556-7900. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | | |  | | | **Please mail this form and payment to:** The Arc of Alabama, 557 S Lawrence Street, Montgomery, AL 36104 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | | | **Authorized Signature:** | | | | | | | | | | | | | | | | | | | | | | | | |  | | **Date:** | | | | | |