

IFMA Foundation's Pirate's Regatta

Monday, October 25, 2021 | 7:00 PM – 10:00 PM | Gaylord Resort – Kissimmee, FL.

Regatta Sponsor ~ \$25,000

- 6 admission tickets
- logo in marketing material, website, social media
- full page ad in a significant area of the program book
- logo on step & repeat backdrop
- photo opportunity
- "Pistol Shoot" for the Regatta Race
- acknowledgement at the event
- video interview

Captain Sponsor ~ \$15,000

- 4 admission tickets, designated VIP table space
- logo in marketing material, website, social media
- logo on Step & Repeat backdrop
- logos placement at 3 game tables/locations
- full page ad space in the program book
- photo opportunity
- acknowledgement at the event.

Quarter Master Sponsor (two available) ~ \$ 8,000

- 2 admission tickets
- logo in marketing material, website, social media
- logo on step & repeat backdrop
- half page ad space in program book
- photo opportunity
- acknowledgement at the event.

Cooks & Grog Sponsor (four available) ~ \$ 5,000

- 2 admission tickets
- your logo will be placed on one of the food tables or bars
- acknowledgement in collateral material, website, social media
- half page ad space in program book
- acknowledgement at the event

Deck Hand Sponsor (six available games) ~ \$1,000

Choose one of these games to place your logo on the table or on the site of the game. Your company's name will also be listed within the program as a sponsor and you will have a quarter page ad space in the program.

- game 1 sponsor
- game 2 sponsor
- game 3 sponsor
- game 4 sponsor
- game 5 sponsor
- photo sponsor (one available)

Quarter Page Ad in program book ~ \$500



PAYMENT FORM

IFMA Foundation's Pirate's Regatta
 Monday, October 25, 2021 | 7:00 PM – 10:00 PM | Gaylord Resort – Kissimmee, FL.

Company Name:		Date:
Contact Name:		Contact Phone #:
Company Address:	City/State	Zip Code
Email:		

Please make checks to: **IFMA Foundation**
 Place in memo section the type of sponsorship

Please mail to: **Attention: Christina Gonzales**
IFMA Foundation
 800 Gessner Road, Suite 900
 Houston, TX 77024-4257

CREDIT CARD INFORMATION

Please charge to (check one):	<input type="checkbox"/> VISA <input type="checkbox"/> Master Card <input type="checkbox"/> American Express <input type="checkbox"/> Discover		
Credit Card Number:	CV#:	Expiration Date:	
Business Name on Card:			
Name on Card:			
Billing Address (if different from above):			
I authorize IFMA Foundation to charge my credit card in accordance with the information above. I understand that this authority will remain in effect until I provide reasonable notification to terminate the authorization.			
Authorized Signature: _____		Date: _____	

You can also email completed form to christina.gonzales@ifma.org