



Sponsorship Opportunities

Selection Form (page 1)

- Hotel Key Card & Parking Sponsor - \$15,000
- Welcome Reception Sponsor - \$5,000
- Happy Hour Sponsor - \$5,000
- Event Registration Sponsor - \$2,500
- Bag Sponsor - \$2,500
- Lanyard Sponsor - \$5,000
- Podium Sponsor - \$2,500
- Welcome Reception Sponsor - \$5,000
- Audio Visual Sponsor - \$1,500
- CAHU Board Meeting Sponsor - \$1,500
- CAHU Foundation Booth Sponsor - \$1,500
- CAHU Leadership Session Sponsor - \$1,500
- Charging Station Sponsor - \$1,500
- Coffee Break Sponsor - \$1,500
- ConnectionZone Photo Booth - \$1,500
- Keynote Speaker Sponsor - \$1,500
- Friends of CAHU Sponsor - \$1,000

Sponsorship Opportunities

Selection Form (page 2)

Sponsor Payment Options

Please designate your sponsorship level on page 1 and complete the information below.
Please mail check payable to "CAHU" or credit card information to the address listed:

California Association of Health Underwriters
2520 Venture Oaks Way, #150
Sacramento, CA 95833

Please do not e-mail contract or credit card information. Please mail or fax to (916) 924-7323.

Upon receipt of payment, you will receive a confirmation e-mail and personal phone call along with other details related to the event, such as how to register for free attendees, shipping, setup, etc. Space assignments will be e-mailed by September 3, 2019. Based on sponsorship level, vendors may be entitled to free registrations to the Convention. Any additional attendees are required to pay the applicable registration fee. The Vanguard event may require separate registration fees, which will be determined by CAHU membership status. Registration instructions will be included with the confirmation e-mail. Thank you.

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- We are enclosing a check for \$ _____ (make payable to CAHU)
 Charge my credit card \$ _____ Visa MasterCard American Express

Card number _____ Expiration Date _____ CID# _____

Billing Address _____ City, State _____ Zip _____

Name on card _____ Signature _____

Name/Company (to be listed as the sponsor) _____

Contact Person _____ E-Mail _____

Address _____ City, State _____ Zip _____

Phone _____ Fax _____

Thank you for your generous support!