TAMPA BAY RESEARCH INSTITUTE
Immune Health Research

45TH ANNIVERSARY

RESEARCH
DISCOVERY
HOPE
A HEALTHIER
TOMORROW

45TH ANNIVERSARY GALA SPONSORSHIP COMMITMENT FORM

Thank you for supporting Tampa Bay Research Institute's 45th Anniversary Gala.
Please complete the information below and return this form with your sponsorship commitment.

SPONSOR INFORMATION

Company/Organization Name: _____

Contact Person: _____

Title: _____

Mailing Address: _____

_____

Phone: _____ Email: _____

RECOGNITION INFORMATION

Please list our sponsorship as:

_____

Company Website URL:

_____

SPONSORSHIP SELECTION

Please select your sponsorship level:

☐ **VISION SPONSOR** — **$45,000**

Benefits Include:
- Premier logo placement on event signage and promotional materials
- Full-page ad in gala program with premier placement
- Prominent recognition during gala presentation
- Recognition on TBRI website and event page
- Two priority seating tables for 16 guests

☐ **DISCOVERY SPONSOR** — **$25,000**

Benefits Include:
- Premier logo placement on event signage and promotional materials
- Full-page ad in gala program with premier placement
- Prominent recognition during gala presentation
- Recognition on TBRI website and event page
- Two priority seating tables for 16 guests

☐ **INNOVATION SPONSOR** — **$15,000**

Benefits Include:
- 3/4-page ad in gala program
- Recognition on promotional event materials
- Recognition during gala presentation
- One priority seating table for 8 guests

☐ **IMPACT SPONSOR** — **$10,000**

Benefits Include:
- 1/2-page ad in gala program
- Recognition during gala presentation
- One priority seating table for 8 guests

☐ **ADVOCATE SPONSOR** — **$5,000**

Benefits Include:
- 1/4-page ad in gala program
- Recognition during gala presentation
- Priority seating for 4 guests

☐ **SUPPORT SPONSOR** — **$2,500**

Benefits Include:
- Name listed in gala program
- Recognition during gala presentation
- Two event tickets

☐ **INDIVIDUAL GUEST TICKET(S)** $175 *Each* | *Number of Tickets:* _____ | *Total Amount:* $_____

LOGO SUBMISSION

☐ I have attached my company logo.

☐ I will email my company logo.

Please email logos to: dbarcley@tbri.org

Preferred formats: EPS, AI, PNG, JPG (high resolution)

PAYMENT METHOD

How would you like to pay?

☐ Check ☐ Credit Card ☐ Online Payment

Make checks payable to:
Tampa Bay Research Institute (TBRI)
11208 Blue Heron Blvd. N., Ste. 110
St. Petersburg, FL 33716

CREDIT CARD PAYMENT

☐ Please contact me regarding credit card payment.

☐ I will use the online payment link/QR code.

QUESTIONS?

Contact: Diane Barcley

Phone: 727-641-2513

Email: dbarcley@tbri.org

SPONSORSHIP COMMITMENT & LOGO SUBMISSION DEADLINE:

_____

AUTHORIZED SIGNATURE

Signature: _____ Date: _____

Thank you for helping advance independent research and immune health discovery through the Tampa Bay Research Institute's 45th Anniversary Gala.