

# LSCP Annual Dinner

Thursday, March 12 // 5:30 p.m. // NMU Ballrooms

## Sponsorship Opportunities

The Lake Superior Community Partnership's Annual Dinner will take place on Thursday March, 12 at the NMU Northern Center Ballrooms. We hope you'll consider being a sponsor of our largest fundraiser of the year and help us raise money for economic development in Marquette County! Once again the event will feature exciting auction items, many raffle baskets, delicious food and networking.

### \$5,000 Sponsorship - (2 available)

- Free 1/4 page ad in Marquette County Vision Magazine – 7,000 copies distributed
- Two (2) free email broadcasts
- Special recognition at Annual Dinner (banner and logo placement)
- Business logo tied to LSCP website for six months
- Six (6) free guests at the Annual Dinner

### \$2,500 Sponsorship

- One (1) free email broadcast
- Special recognition at Annual Dinner (banner and logo placement)
- Enhanced business advertising in LSCP lobby
- Business logo tied to LSCP website for three months
- Two (2) free guests at the Annual Dinner

### \$1,000 Sponsorship

- One (1) free email broadcast
- Recognition at Annual Dinner (logo placement)
- Business logo tied to LSCP website for one month
- One (1) free guest at the Annual Dinner

### \$500 Sponsorship

- One (1) free email broadcast
- Recognition at Annual Dinner (logo placement)

### \$250 Sponsorship

- Recognition at the Annual Dinner (logo placement)



# Annual Dinner Sponsorship Commitment Form

I would like to support the Lake Superior Community Partnership's Annual Dinner and Economic Development in Marquette County. Please sign me up for the following package:

## Annual Dinner:

- \$5,000
- \$2,500
- \$1,000
- \$500
- \$250



- I would like to purchase tickets - \_\_\_\_\_ @ \$75  
(groups of 8 receive a reserved table)

Attendees \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- I would like to donate an auction or prize item  
Item description: \_\_\_\_\_

Company \_\_\_\_\_

Contact \_\_\_\_\_

Phone Number \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_

## Payment:

- Invoice
- Check
- Credit Card

Total \$ \_\_\_\_\_

Card Number \_\_\_\_\_

Exp Date \_\_\_\_\_ Code \_\_\_\_\_ Name on Card \_\_\_\_\_

Signature \_\_\_\_\_

Please send this completed form to Ashley Szczepanski (ashley@marquette.org )  
or 501 S. Front St., Marquette, MI 49855)