



Nationally presented by
Genworth Financial

National Platinum Teams:



National Member Teams:



Alzheimer's disease affects over 5 million Americans. Take steps to end Alzheimer's by sponsoring the Association's largest fundraising event, the 17th Annual Alzheimer's Association, Connecticut Chapter Memory Walk®. Over 3,000 Connecticut residents have joined the fight against this deadly disease. Proceeds help us support programs and services critical to families whose lives have been touched by Alzheimer's disease.

Sponsorship Opportunities:


STATEWIDE **REGIONAL**

	Title \$ 20,000	Benefactor \$ 12,000	Patron \$ 7500	Friend \$ 5,000	Gold \$ 2500	Silver \$ 1500	Bronze \$ 500
1. Recognition on all event PROMOTIONAL MATERIALS	✓	✓	✓	✓			
2. Placement of your logo in EVENT BROCHURE	✓ Cover	✓ Inside	✓ Inside 2 nd largest	✓ Inside 3 rd largest			
3. Placement of your logo/name on event T-SHIRTS	✓ Logo, Largest	✓ Logo, Second	✓ Logo, Third	✓ Logo, Fourth	✓ Name	✓ Name	✓ Name
4. Placement of your logo/name on Association Memory Walk WEBSITE	✓ Logo w/link	✓ Logo w/link	✓ Logo	✓ Logo	✓ Name	✓ Name	
5. Logo/name on individual ROUTE SIGNS	✓ Logo 5 sites	✓ Logo 5 sites	✓ Name 5 sites	✓ Name 5 sites	✓ Name 4 sites	✓ Name 3 sites	✓ Name 1 site
6. Your logo/name displayed on SPONSOR BOARD at each walk site	✓ Logo 5 sites	✓ Logo 5 sites	✓ Name 5 sites	✓ Name 5 sites	✓ Name 4 sites	✓ Name 3 sites	✓ Name 1 site
7. VERBAL RECOGNITION of your commitment at each walk site	✓	✓	✓	✓	✓	✓	✓
8. EXHIBIT TABLE provided at walk site(s) for your displays and materials	✓ 5 sites	✓ 5 sites	✓ 5 sites	✓ 5 sites	✓ 4 sites	✓ 3 sites	
9. Recognition in Chapter NEWSLETTER 17,000+ subscribers	✓	✓	✓	✓	✓	✓	✓
10. BANNER displayed at walk site(s) * Provided by company	✓ 5 sites	✓ 5 sites					
11. Your logo/name on EVENT BANNER at walk site(s)	✓ Logo 5 sites	✓ Name 5 sites					

* Deadlines apply; Payment arrangements available

SEE REVERSE SIDE FOR REGISTRATION FORM



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Sponsor Registration Form

Please select the Region(s) and the level of sponsor support for your company:

STATEWIDE: Title \$20,000 _____ Benefactor \$12,000 _____ Patron \$ 7,500 _____
Friend \$ 5,000 _____

REGIONAL: Gold \$ 2,500 _____ Silver \$1,500 _____ Bronze \$ 500 _____

My company is sponsoring the following FALL '09 Walk locations:

Enfield Waterford Hartford New Haven Norwalk

Name _____

Company _____

(Please indicate how you would like the company name to appear on the T-Shirt and Signage above.)

Address _____

City _____ State _____ Zip _____

Phone _____ Fax _____

E-mail Address: _____

Indicate Method of Payment:

Please Invoice at above address

Check Enclosed Amount: \$ _____ Check #: _____

We are interested in forming a corporate team for Memory Walk.

Mail or fax this sponsor registration to:

MEMORY WALK
Alzheimer's Association Connecticut Chapter
279 New Britain Rd. Ste. 5
Kensington, CT 06037
Phone: (860) 828-2828 | Fax: (860) 828-2417