



IMAGINE PRESENTING SPONSOR \$25,000 (Limited Opportunity)

- Prominent name/logo recognition as lead **PRESENTING Sponsor or Co-Presenting Sponsor** on all event materials including digital invitation and program, event signage, social media, NTSAD website, and e-newsletter.
- Opportunity to host one 60-minute focus group with family members at a mutually agreeable date.
- Tickets for 15 people.
- Opportunity to participate in pre-promotion event videos.
- Verbal acknowledgement and recognition at the beginning of the speaking program.

BELIEVE \$12,500

- Prominent name/logo recognition as lead **BELIEVE Sponsor** on all event materials including digital invitation and program, event signage, social media, NTSAD website and e-newsletter.
- Tickets for 10 people.

HOPE \$6,500

- Prominent name/logo recognition as lead **HOPE Sponsor** on all event materials including digital invitation and program, event signage, social media, NTSAD website and e-newsletter.
- Tickets for 8 people.

INSPIRATION \$3,000

- Prominent name/logo recognition as lead **INSPIRATION Sponsor** on all event materials including digital invitation and program, event signage, social media, NTSAD website and e-newsletter.
- Tickets for 6 people.

DETERMINATION \$1,650

- Prominent name/logo recognition as lead **DETERMINATION Sponsor** on all event materials including digital invitation and program, event signage, social media, NTSAD website and e-newsletter.
- Tickets for 4 people.

RARE \$750

- Tickets for 2 people, half page recognition in digital program.

ADVOCATE \$500

- Ticket for one person, half page recognition in digital program.

INDIVIDUAL TICKET \$200

DIGITAL PROGRAM RECOGNITION

Full screen \$1000, Half Screen \$500, Quarter Screen \$250

For more information, to register, or make a donation visit www.ntsad.org.

To sponsor Imagine & Believe, please contact Susan Keliher Director of Development and Communications at skeliher@ntsad.org.

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I would like to make a donation in the amount of \$_____ to NTSAD.
My gift of \$_____ is (circle one) in Memory of/In Honor of _____.
My gift is in honor of Dr. Guangping Gao.

Sponsor Information

Company Name (If Applicable)

Contact Name

Address

Phone

Email

Sponsorship Level

- Please invoice me
- Please send wire transfer info
- Check payable to: NTSAD 2001 Beacon Street #204, Boston, MA 02135
- VISA/MASTERCARD/AMEX/DISCOVER

Name as it appears on card

Card Number

Expiration Date

Security Code

Billing Address Zip Code

For digital program recognition, please email your logo (jpeg, gif, tiff), photos, or brief message to Sydnie Dimond, Development and Communications Associate at sdimond@ntsad.org. For questions, please call 617-277-4463.