



2017 DWTS Sponsorship Opportunities

Embassy Suites in Loveland

A Fundraising Gala Benefitting The Leader in Me

\$4500 Local Star Sponsor

- Receives 10 VIP tickets (full table) to the event
- Full page ad in event program
- Your company name on the table presented that evening
- Your company logo on the Loveland Chamber website and
- Spotlight in the Reporter Herald Focus, and company logo on all "DWTS" marketing distributions

\$2500 Trophy Sponsor

- Receives 8 VIP tickets (full table) to the event
- Half page ad in event program
- Your company name on the table presented that evening
- Your company name on the trophy and presentation rights for the night of the event to the winning dancer
- Your company logo on all "DWTS" marketing distributions

\$2000 Meal Sponsor

- Receives 8 VIP tickets (full table) to the event
- Half page ad in event program
- Your company name on the table presented that evening
- Your company logo on all "DWTS" marketing distributions

\$2000 Video Sponsor (Limited to 4)

- Receives 8 VIP tickets (full table) to the event
- Half page ad in event program
- Your company name on the table presented that evening
- Your company name on the video presented that evening
- Your company logo on all "DWTS" marketing distributions

\$1200 Table Sponsor

- Receives 8 VIP tickets (full table) to the event
- Your company name on the table presented that evening
- Your company logo on the "DWTS" marketing pieces distributed for the event

Dancing With the Stars Sponsorship Agreement

Sponsorship Level: _____ \$ _____

Company: _____ Contact Person: _____

Complete Address: _____

Phone: _____ E-Mail: _____

Additional Tickets:

Number of Individual Tickets (\$80.00): _____ Table of 8 (\$640.00): _____

List of all attending (please continue on reverse side if needed):

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

_____ **Date** _____
Authorized Signature for Sponsor

_____ **Date** _____
Authorized Signature for Chamber

Please charge our credit card **OR** Please bill us

Name On Card: _____ Amount: _____

Card #: _____ CID#: _____

Billing ZIP: _____ Exp: _____ Phone Number: _____

_____ **Date** _____
Authorized Signature of Card Holder

Loveland Chamber of Commerce
5400 Stone Creek Circle, Suite 200, Loveland CO 80538
Phone: (970) 667-6311 • E-mail: info@loveland.org



2017 DWTS Registration Form

A Fundraising Gala Benefitting The Leader in Me

Contact Person: _____

Phone: _____ Email: _____

Address: _____

Number of Individual Tickets (\$80.00): _____

Table of 8 (\$640.00): _____ Total: \$ _____

List of all attending (please continue on reverse side if needed):

Please charge our credit card **OR** Please bill us

Name On Card: _____ Amount: _____

Card #: _____ CID#: _____

Billing ZIP: _____ Exp: _____ Phone Number: _____

Authorized Signature of Card Holder

Date

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