

ANNUAL CONFERENCE*uncork new knowledge***2016 Annual Conference Sponsor Agreement**

Sponsor Levels	Presenting Sponsor \$2,000	Keynote Speaker \$1,500	Attendee Bag \$1,500	Workshop Speaker \$1,000	Iowa Wine Banquet & Dinner \$1,000	Meals \$750	Iowa Wine Reception \$750	Gold Sponsor \$500	Total:				
Check One:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
Exhibit Space	Included	Included	Included	Included	\$125	\$125	\$125	\$187.50	\$				
Additional Table/Space	\$200	\$200	\$200	\$200	\$200	\$200	\$200	\$200	\$				
Electrical Outlet (check if needed)	Included	Included	Included	Included	\$25	\$25	\$25	\$25	\$				
Benefits	<i>To ensure inclusion in print materials, please submit your sponsor registration by 2/12/2016.</i>												
Complimentary Registrations with meals	4	3	3	1	1	1	1	1					
Complimentary Iowa Wine Reception Tickets	4	2	2	2	2	1	2	-					
Complimentary Iowa Wine Banquet & Dinner Tickets	4	2	2	1	2	-	-	-					
Please select any add-ons to your sponsor package:													
___ Additional All Inclusive Conference Registration(s) - includes all programming, meals and tickets to Iowa Wine Awards Banquet & Dinner and Reception on Sunday evening \$250 (Member)/\$290 (Non-Member)				___ Additional Iowa Wine Awards Banquet & Dinner Ticket(s) \$45 per person		___ Additional Iowa Wine Reception Ticket(s) \$20 per person		\$					
Additional Meal(s)	\$30 Lunch <input type="checkbox"/> ___ Sunday <input type="checkbox"/> ___ Monday \$20 Breakfast <input type="checkbox"/> ___ Monday								\$				
Membership													
IWGA 2016 Dues	<i>Receive the best value by becoming a bronze, silver or gold corporate/affiliate IWGA member! Contact us for details.</i>								\$				
Grand Total:									\$				

☐ I agree to sponsor the 2016 Iowa Wine Growers Association's Annual Conference at the above level.

Business: _____

Contact: _____

Address: _____ City: _____ State: _____ Zip: _____

Email: _____ Phone: _____

Signature: _____

☐ Payment Enclosed ☐ Invoice Me ☐ Credit Card # _____

Total Enclosed: _____ Exp: _____ SEC Code: _____

Sponsor Name(s) for Name Tags:

1. _____ 2. _____

3. _____ 4. _____

Return your completed form and payment to:6919 Vista Dr. | West Des Moines, IA 50266 | info@iowawinegrowers.org**For more information, contact:**Nicole Eilers at nicole@iowawinegrowers.org or 515.664.7754
IOWA WINE GROWERS ASSOCIATION