2024 DeLIVERing Hope Ambassador Kickoff Sponsorship

Thursday, June 27, 2024
5:30 - 7:30 pm
Highmark Stadium
(Station Square)

By supporting initiatives like DeLIVERing Hope, we can shine a light on this important cause and make a tangible difference in the lives of those impacted. Together, we can raise awareness, offer support, and DeLIVER hope to those affected by liver disease. Join us!
The Community Liver Alliance (CLA) announces its third annual awareness campaign - DeLIVERing Hope - to take place from April through September 2024. The campaign calls attention to the prevalence of liver diseases and the disparities that exist among vulnerable populations. DeLIVERing Hope provides an opportunity for the public to receive a vibrant bouquet of sunflowers for their donation towards our mission. All donations will support the mission of the Community Liver Alliance to brighten the future of the liver community through disease awareness, education, advocacy, and research.

Give voice to the liver community
When you support the DeLIVERing Hope campaign, you’ll be helping the Community Liver Alliance fulfill its mission of giving a voice to millions of people in the liver community. Every bunch of sunflowers purchased allows us to continue raising awareness, supporting patients and investing in cutting edge research.

Make a difference in the health of your community
There are more than 100 different liver diseases affecting millions of people around the world. Many of these patients, along with their family members and health care providers, are in your community. The DeLIVERing Hope campaign is the prelude of our work to deliver our upcoming “Addressing Disparities in Liver Diseases Conference”, which will enable us to identify strategies to impact health equity.

Offer hope to those that need it most
Anyone can be affected by liver diseases. Even more, there are persistent health disparities that affect socially disadvantaged populations. These disparities are linked to some common liver diseases including viral hepatitis, fatty liver disease, liver cancer, and access to life-saving liver transplantation. Your support of the DeLIVERing Hope campaign will help the CLA reach those who are at the greatest risk.
# Sponsorship Packages

## Presenting Sponsor
- Display table and five admissions to the kickoff event.
- Exclusive branding as the Presenting Sponsor in all campaign and event marketing materials, including posters, flyers, social media posts, and press releases.
- Prominent logo placement on event signage, banners, and printed materials.
- Opportunity for a representative to speak at the event.
- Opportunity to include branded promotional items in ambassador bags.
- Recognition on the CLA’s website and social media platforms as the Presenting Sponsor with links to the sponsor's website.

**$2,500**

## Gold Sponsor
This sponsorship is created for healthcare facilities and pharmaceutical companies.
- Display table and three admissions to the kickoff event.
- Logo placement on event marketing materials and signage.
- Verbal acknowledgment as a Gold Sponsor during the event.
- Recognition on the CLA's website and social media platforms as a Gold Sponsor with links to the sponsor's website.
- Opportunity to include branded promotional items in ambassador bags.

**$1,000**

## Small Business* Display Table
- Display table and two admissions to the kickoff event.
- Logo placement on event marketing materials and signage.
- Opportunity to include branded promotional items in ambassador bags.

**$500**

## Parking Pass
- Two admissions to the kickoff event.
- Logo placement on event marketing materials and signage.
- Opportunity to include branded promotional items in ambassador bags.

**1 available**

**$500**

## Bar Sponsorship
- Two admissions to the kickoff event.
- Logo placement on event marketing materials and signage with additional signage at the bar.
- Sponsorship provides one drink ticket for each attendee.
- Opportunity to include branded promotional items in ambassador bags.

**1 available**

**$850**
Payment Form

$2,500 ___ Presenting Sponsor  $1,000  ___ Gold Sponsor  $500  ___ Small Business
$500 ___ Parking Pass  $850  ___ Bar Sponsor

Name_________________________________________________________________________________________
Company Name________________________________________________________________________________
Address______________________________________________________________________________________
City________________________________________________________State_____________ Zip______________
Phone_________________________________ Email __________________________________________________

Please make checks payable to the Community Liver Alliance
Credit Card Payment *** PROCESSING FEES WILL APPLY TO ALL CREDIT CARD/ONLINE TRANSACTIONS

Credit Card Payment

I _______________________________________ authorize Community Liver Alliance to charge my credit card
(full name)
account indicated below for ________________ on or after____________________________. This payment is for
(amount)  (date)
____________________________________________________________________________________________.
(Description of goods/services)

Billing Address ____________________________________________  Phone# ______________________
City, State, Zip __________________________________________  Email ______________________________________

Account Type:  Visa     MasterCard     AMEX     Discover
Cardholder Name _____________________________________________________________________________
Account Number ______________________________________________________________________________
Expiration Date ______________________  Billing Zip Code ______________________
CVV2 (3-digit number on back of Visa/MC, 4 digits on front of AMEX) ____________

SIGNATURE____________________________________________________  DATE ______________________

I authorize the above-named business to charge the credit card indicated in this authorization form according to the terms
outlined above. This payment authorization is for the goods/services described above, for the amount indicated above
only, and is valid for one time use only. I certify that I am an authorized user of this credit card and that I will not dispute
the payment with my credit card company; so long as the transaction corresponds to the terms indicated in this form.
Contact Us

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*Organizations purchasing a Small Business Display Table must be recognized as a small business.