



ILLINOIS TELEHEALTH INITIATIVE

2019 Awards for Excellence in Telehealth Leadership

LUNCHEON SPONSORSHIP AGREEMENT

Monday, November 18, 2019

12:00 NOON (CT)

Drinker Biddle Reath

191 N. Wacker Dr. -3700

Chicago, IL 60606

Improved Care for Underserved Populations

- **Leadership Awards**
 - **Thresholds**
 - **Jesse Brown VA Medical Center**
- **Achievement Awards**
 - **Illini Community Hospital**
 - **Southern Illinois Healthcare**

Platinum-Level Sponsor (\$2,500)

- Recognition during opening and closing of the lunch.
- Table of 8 guests with premier seating (Value \$800)
- Name on website recognizing sponsorship
- Full-page ad in event program book

Gold-Level Sponsor \$(1,500)

- 4 guests to attend luncheon with premier seating (Value \$400)

- Name on website recognizing sponsorship
- Half-page ad in event program book

Silver-Level Sponsor (\$750)

- 2 guests to attend luncheon (Value \$200)
- Recognized in event program book

General Terms and Conditions

Total payment is due at the time of signing this Agreement. A credit card is required to reserve your sponsorship. Should the Partnership for a Connected Illinois (the “PCI”) not receive payment as set forth herein, the PCI reserves the right to cancel your sponsorship. The PCI will make reasonable efforts to provide the event sponsor with all of the benefits associated with the purchased level of sponsorship (e.g., Platinum, Gold, Silver, Bronze).

Names and titles of the persons who will be using the complimentary admissions must be provided to Nancy L. Kaszak at telehealth@broadbandillinois.org no later than ten (10) business days before the date of the event. Please direct any questions about this sponsorship opportunity to Nancy L. Kaszak at telehealth@broadbandillinois.org or 217-8864228.

Release

Your company hereby agrees to hold the PCI (as well as its sponsors, officers, directors, employees, and agents) and each of the venues (as well as their officers, directors, employees, and agents) harmless from any liability, damages, or costs (including reasonable attorney’s fees) that may arise in connection with your participation in the Forum as a sponsor and/or attendee.

By signing below, you agree to the foregoing provisions. Please return this Agreement Nancy L. Kaszak at telehealth@broadbandillinois.org, 4300 N. Marine Dr.-1204, Chicago, IL 60613 by fax at 773-326-0822.

Signature:

By: _____

Its: _____

Date: _____

NAME OF SPONSOR:

SPONSOR LEVEL:

_____ **Platinum \$2,500**

_____ **Gold \$1,500**

_____ **Silver \$750**

CONTACT AND PAYMENT INFORMATION:

Pay online:

<http://www.broadbandillinois.org/index.html>

OR

Pay by check payable to “Partnership for a Connected Illinois” c/o Nancy Kaszak, 4300 N. Marine Dr.-1204, Chicago, IL 60613

| | | |
|--------------|-------|--------------------|
| Contact Name | | |
| Title | | |
| Address | | |
| City | State | Credit Card Number |
| Phone | | |
| Fax | | |
| E-Mail | | |

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| CHECK ENCLOSED: Please make checks payable to “Partnership for a Connected Illinois” and mail them to Nancy Kaszak, 4300 North Marine Drive, 1204, Chicago, IL 60613. |
| VISA MASTERCARD AMEX DISCOVER |
| Card Number |
| Name on Card |
| Billing Address |
| City State Zip |
| CVV2 (3-Digit Security Code) |
| Expiration (MM/YY) |
| Signature |