



COUNCIL FOR ADVANCEMENT
AND SUPPORT OF EDUCATION®

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CONTACT

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An Invitation to Sponsor and Exhibit

Annual Conference for

Senior Annual Giving Professionals

May 10-12, 2010

Sheraton Wildhorse Pass Resort & Spa
Phoenix, Ariz.

Reserve your hotel room by April 7, 2010 to receive the discounted rate.
Call the hotel to make your reservation at (602) 225-0100 or go online to
www.wildhorsepassresort.com

For details on conference sessions, speakers, and more go to:
www.case.org

Enter CASE Code: **AG**



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Senior Annual Giving

Take the opportunity to reach out to:

Directors of Annual Giving

Directors of Development

Vice presidents of advancement

Annual giving/marketing communication managers

For details on conference sessions, speakers, and more go to:

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Enter CASE Code:
AG

February 2010

Dear Colleague:

CASE invites you to sponsor and exhibit at our upcoming annual conference for Senior Annual Giving Professionals at the Sheraton Wild Horse Pass Resort & Spa in Phoenix, Ariz. Come and share your tips, techniques and results with other senior-level annual giving professionals at this interactive conference.

Audience:

- Directors of Annual Giving
- Directors of Development
- Vice presidents of advancement
- Annual giving/marketing communication managers

Budgeted Attendance: 100

CASE offers several ways you can participate and gain visibility among conference attendees. We invite you to be a part of these exciting conferences:

Sponsorships enable your company to gain recognition as a CASE supporter. Your sponsorship entitles you to receive one complimentary registration, a copy of onsite program materials, and an advance registration list of conference participants. Sponsors receive recognition at individual functions, including signage, with company logo in all conference promotional materials and on the conference Web site. Enclosed please find a listing of sponsorship opportunities. Choose the one that is best for your company.

Tabletop exhibits offer you an opportunity to discuss your products and services with potential clients. We offer tabletop exhibiting opportunities for 6-10 exhibitors, contingent on availability at the hotel. Enclosed please find the tabletop exhibit registration form.

We hope you find participation in this conference to be a worthwhile investment. Please contact me at (202) 478-5636 or freeman@case.org if you have any questions. We look forward to hearing from you soon.

Kind Regards,

Wanda Freeman

Wanda Freeman
Senior Exhibits Coordinator

An Invitation to Sponsor and Exhibit



Annual Conference for **Senior Annual Giving Professionals**

May 10-12, 2010

Sheraton Wild Horse Pass Resort & Spa
Phoenix, Ariz.

EXHIBIT OPPORTUNITIES

Annual Conference for
Senior Annual Giving Professionals

What you receive with your tabletop exhibit:

- One 6' table for tabletop exhibit
- Exhibitor identification page in packet
- Copy of onsite program materials including one-time rental of registration list
- One free registration with access to sessions and events

Audience:

- Directors of Annual Giving
- Directors of Development
- Vice presidents of advancement
- Annual giving/marketing communication managers

Budgeted Attendance: 100

Conference Chair:

Dan Allenby
Vice President for Annual Giving
Grenzebach Glier and Associates
Former Director of Annual Giving Strategy
& Operations at Tufts University

Tabletop Fees Per Conference:

CASE Educational Partner	\$1,120	Non-Educational Partner	\$ 1,340
Additional Reps	\$ 375	Additional Reps	\$ 550

Where you'll stay:

Sheraton Wild Horse Pass Resort & Spa
5594 West Wild Horse Pass Boulevard
Chandler, AZ 85226
(602) 225-0100
www.wildhorsepassresort.com

For details on
conference sessions,
speakers, and more
go to:
www.case.org

Enter CASE Code:
AG

Discounted hotel rate: \$249 single or double (plus tax)

Deadline to receive the discounted rate: April 7, 2010

Please contact Wanda Freeman at (202) 478-5636 to reserve your exhibit space or fill out the Tabletop Exhibit Registration form and fax it to my attention at (202) 332-1964.



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SPONSORSHIP OPPORTUNITIES

Annual Conference for Senior Annual Giving Professionals

All sponsorship levels receive:

- Company logo on conference Web site
- Sponsor identification page in packet
- Copy of onsite program materials including one-time rental of registration list
- Signage at sponsored event
- One complimentary registration

Sponsorship

Monday, May 10
*Networking Reception

Tuesday, May 11
Breakfast Roundtables

Tuesday, May 11
Lunch

Wednesday, May 12
Breakfast Roundtables

Level

\$3,500

\$2,500

\$5,000

\$2,500

Additional Recognition

(15) Table Tents at Food Stations

(8) Table Tents at Food Stations

Table Tents on Luncheon Tables

(8) Table Tents at Food Stations

***NOTE:** The Networking Reception is **cash bar**.

Please contact Wanda Freeman at (202) 478-5636 to reserve your sponsorship opportunities or fill out the Sponsorship Registration form and fax it to my attention at (202) 332-1964.



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**SPONSORSHIP
REGISTRATION
FORM**

Senior Annual Giving Professionals

My company would like to sponsor: *(check all that apply)*

- Networking Reception, Monday, May 10 **\$ 3,500**
- Continental Breakfast, Tuesday, May 11 **\$ 2,500**
- Lunch, Tuesday, Tuesday, May 11 **\$ 5,000**
- Continental Breakfast, Wednesday, May 12 **\$ 2,500**

**Please contact
Wanda Freeman at
(202) 478-5636 or
freeman@case.org
to reserve your
sponsorship or
you can fax your
form to my
attention at
(202) 332-1964.**

Name _____

First Name on Badge _____

Title _____

Company _____

Address _____

City/State/Zip _____

Phone _____ Fax _____

E-mail _____ Web Address _____

Please provide company description via email to freeman@case.org (35 words or less):

For details on
conference
sessions,
speakers, and
more
go to:
www.case.org

Enter CASE Code:
AG

NOTE:
Sponsorship of
any event is
inclusive of **one**
complimentary
registration. If
additional persons
would like to
attend please see
the additional
representative fee
as listed above.

Payment Information		For CASE use: 5810- 51075
CHARGE to:	<input type="checkbox"/> VISA	<input type="checkbox"/> MasterCard <input type="checkbox"/> American Express
Account Number	Exp. Date	
Cardholder's Signature	Date	
<input type="checkbox"/> A CHECK payable to CASE is enclosed.		
Mail to: CASE, Dept 4022, Washington, DC 20042-4022 When mailing, allow at least 2 weeks for delivery and processing		



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Senior Annual Giving Professionals

May 10-12, 2010

Sheraton Wild Horse Pass Resort & Spa
Phoenix, Ariz.

Tabletop registration includes:

- One 6' draped table for tabletop exhibit
- One chair and a waste basket
- Exhibitor listing in conference materials
- Copy of onsite program materials including one time rental of registration list
- Complimentary registration with free access to sessions and events

Tabletop Exhibit Fees Per Conference:

- | | | | |
|---|-----------------|--|-----------------|
| <input type="checkbox"/> CASE Educational Partner | \$ 1,120 | <input type="checkbox"/> Non-Educational Partner | \$ 1,340 |
| <input type="checkbox"/> Additional Reps | \$ 375 | <input type="checkbox"/> Additional Reps | \$ 550 |

TABLETOP EXHIBIT REGISTRATION

Please contact Wanda Freeman at (202) 478-5636 or freeman@case.org to reserve your booth space or you can fax your form to my attention at (202) 332-1964.

Cancellation Policy

If CASE receives your Exhibit booth cancellation

- **At least three weeks before the conference start date**—You will receive a full refund.
- **One to two weeks before the conference start date**—You will be refunded your registration fee for your exhibit space less a \$200 processing fee. Additional company rep. cancellation will receive a refund less a \$60 processing fee.
- **Less than one week before conference start date**—You will not receive a refund.
- **“No Shows”**—You will not receive a refund.

CASE reserves the right to cancel any program. CASE is not responsible for any cancellation or change fees assessed by airlines, hotels or travel agents.

Name _____

First Name on Badge _____

Title _____

Company _____

Address _____

City/State/Zip _____

Phone _____ Fax _____

E-mail _____ Web Address _____

Please provide company description or email to freeman@case.org (35 words or less):

Payment Information:		For CASE use: 5520- 51075
CHARGE to: <input type="checkbox"/> VISA <input type="checkbox"/> MasterCard <input type="checkbox"/> American Express		
Account Number	Exp. Date	
Cardholder's Signature	Date	
<input type="checkbox"/> A CHECK payable to CASE is enclosed. Mail to: CASE, Dept 4022, Washington, DC 20042-4022 <input type="checkbox"/> Fax to: (202) 332-1964		
NOTE: When mailing, please allow at least 2 weeks for delivery and processing.		