

About the Walk of Hope

RESOLVE's Walk of Hope is a morning event where local businesses support the infertility community, share health and wellness tips, and where we walk together, 1-mile, to show support for people with infertility. The Walk of Hope benefits RESOLVE: The National Infertility Association's mission to improve the lives of people with infertility.

How to Participate

- Become a **SPONSOR!**
- **PROMOTE** the Walk to your patients, clients, friends and family.
- **BUILD** a Walk team with your staff, colleagues, and past and current clients.
- **DONATE** to the raffle. Items donated should be related to health & wellness or gift cards for fun experiences (i.e. restaurant, spa, hotel/travel package, etc).

About RESOLVE

RESOLVE: The National Infertility Association, is a non-profit organization with the only established, nationwide network mandated to promote reproductive health and ensure equal access to all family building options for women and men experiencing infertility or other reproductive disorders.

RESOLVE improves the lives of women and men living with infertility.

Visit www.resolve.org to learn more about our mission, public awareness campaigns, and public policy efforts.

Sponsorship opportunities & benefits.

Please contact: Jenlene Nowak
National Manager, Walks of Hope
T: 703.556.7172
E: walkofhopeinfo@resolve.org



One Morning. One Mile. One Community.

RESOLVE's Walk of Hope 2017
March, April, May & June: Texas - Southern California - New York - Colorado
September & October: Massachusetts - Northern California - Washington, D.C.

3 GREAT REASONS TO BECOME A SPONSOR

VISIBILITY

You will receive exposure in the community you serve. Through promotion leading up to the Walk, and at the event, your company will be spotlighted as a supporter of this important cause.

ADVOCACY

Your financial support benefits RESOLVE's work at **both** the national and local levels through patient support, education, and advocacy.

COMMUNITY

Raising awareness about infertility is important to building a community of support for those on this journey. The Walk is the only event of its kind that brings those affected by infertility together to send one powerful message: You Are Not Alone!

www.resolve.org/walkofhope

Creating a successful and memorable *Walk of Hope* requires active involvement from RESOLVE and our sponsors. RESOLVE will recognize the investment our sponsors make in supporting our mission through a variety of web-based, print, and on-site acknowledgements.

LEVELS & BENEFITS	Presenting \$5,000	Champion \$2,500	Advocate \$1,000	Hope \$500	Community \$250
Membership in Corporate Council or Major Donor Council (where appropriate)					
Opportunity to present award and give brief remarks during opening ceremony.	X				
Recognition on any RESOLVE press release (s) for event.	X				
Recognition in event email communications sent by RESOLVE.	X				
Opportunity to co-brand event marketing materials for distribution to company's networks.	X				
Opportunity to include one (1) company branded item in participant bags.	X	X			
Opportunity to have company name posted on RESOLVE mission signs along walk route.	2	1			
Recognition on official event T -shirt.*	LOGO	LOGO	LOGO	TEXT	
Recognition on event day stage signage.*	LOGO	LOGO	LOGO	TEXT	
Recognition as sponsor on event website.*	LOGO	LOGO	LOGO	TEXT	
Complimentary <i>Walk of Hope</i> t-shirt.	5	3	2	1	
Exhibitor space at event; one (1) 10'x10' canopy and one (1) 6' table.	X	X	X		
Shared Table in Community Sponsor Area.				X	X
Access to event marketing materials (i.e. flyers).	X	X	X	X	X
Opportunity to have local volunteers conduct a kick-off meeting to encourage team participation.	X	X	X	X	X

* Logo size commensurate with sponsorship level.

Commitment form and logo must be received no later than two (2) weeks prior to event to be included on t-shirt and signage.

Please complete this two-page form and return it to Jenlene Nowak
Either by email WalkofHopeInfo@resolve.org or fax #703.506.3266

WALK LOCATION: (Please indicate the 2017 Walk(s) of Hope you are sponsoring at this time.)

- | | | |
|---|---|---|
| <input type="checkbox"/> Dallas, TX (April 1) | <input type="checkbox"/> New York City (May 20) | <input type="checkbox"/> Dedham, MA (Sept. 17) |
| <input type="checkbox"/> Houston, TX (April 23) | <input type="checkbox"/> Chicago, IL (June 10) | <input type="checkbox"/> New England |
| <input type="checkbox"/> San Diego, CA (April 30) | <input type="checkbox"/> Denver, CO (June 24) | <input type="checkbox"/> Sacramento, CA (Sept. 23) |
| | | <input type="checkbox"/> Washington, D.C. (Oct. 14) |

SPONSORSHIP LEVEL:

- Presenting (\$5,000) Champion (\$2,500) Advocate (\$1,000) Hope (\$500) Community (\$250)
- YES! I've emailed my VECTOR file logo (eps, ai) OR high resolution image (png/jpg 300 dpi) color logo to WalkofHopeInfo@resolve.org
- YES! I'd like my company to receive special recognition at the Walk! I'll send Walk emails to my patients & customers. (Content provided by RESOLVE.)

CONTACT INFORMATION:

Name & Title: _____

Company: _____

Address: _____

City/State/Zip: _____ Website: _____

Telephone: _____ Email: _____

If different from the person listed above, please provide the following information:

Marketing Contact: _____
NAME Phone Email

Event Day Contact: _____
NAME Phone Email

Also, to assist with our event planning please share what you're planning to do in your designated space (i.e. Branded giveaways? Food? Water? Activities?) We won't share this information! _____

PAYMENT INFORMATION:

- Please invoice me. **OR** Please charge my: MasterCard Visa American Express Discover

Total \$ _____ Signature (for credit card payments): _____

Card # _____ Security Code _____ Expiration Date _____

Cardholder Name: _____

Address of Cardholder; if different than above (include street, city, state, zip) _____

Phone (required for credit card payments): _____

THANK YOU! WE APPRECIATE YOUR SUPPORT!

RESOLVE Accounting Use Only: GL: _____ Invoice #: _____ Payment Processed On: _____