



# 2019 Short Course Sponsorship Opportunities

The Minnesota Crop Production Retailers offers vendors an opportunity through sponsorship of our annual CPM Short Course and MCPR Trade Show to continue support of the meeting and provide increased visibility for those sponsors. *Please select the level of Sponsorship your company will commit too.*

## DIAMOND LEVEL SPONSORSHIP - \$1,800+

- Large company logo in the Program Guide
- Large company logo on MCPR signage at the Minneapolis Convention Center
- Large company logo on MCPR signage at the Hilton Hotel for the Chairman's Reception
- Large company logo on screensavers in all classrooms
- Acknowledgement at your booth as a "Diamond Sponsor"
- Acknowledgement on the MCPR website WITH a linked company logo to the company's website

## PLATINUM LEVEL SPONSORSHIP - \$1200

- Medium company logo in the Program Guide
- Medium company logo on MCPR signage at the Minneapolis Convention Center
- Medium company logo on MCPR signage at the Hilton Hotel for the Chairman's Reception
- Medium company logo on screensavers in all classrooms
- Acknowledgement on the MCPR website

## GOLD LEVEL SPONSORSHIP - \$900

- Small company logo in the Program Guide
- Small company logo on MCPR signage at the Minneapolis Convention Center
- Small company logo on MCPR signage at the Hilton Hotel for the Chairman's Reception
- Small company logo on screensavers in all classrooms
- Acknowledgement on the MCPR website

## SILVER LEVEL SPONSORSHIP - \$600

- Large company name in the Program Guide
- Large company name on MCPR signage at the Minneapolis Convention Center
- Large company name on MCPR signage at the Hilton Hotel for the Chairman's Reception
- Acknowledgement on the MCPR website

## BRONZE LEVEL SPONSORSHIP - \$300

- Medium company name in the Program Guide
- Medium company name on MCPR signage at the Minneapolis Convention Center
- Acknowledgement on the MCPR website

## Method of Payment

Please Invoice     Check    Charge to:  VISA    MC    AMEX

Card Number \_\_\_\_\_ Ex Date \_\_\_\_\_ CVV# \_\_\_\_\_

Name on Card \_\_\_\_\_

Billing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

## Company Info

Company \_\_\_\_\_

Contact Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

**TIME SENSITIVE: Please remit form prior to August 27, 2019 to be recognized in the brochure.**