



**NATIONAL COALITION OF 100 BLACK WOMEN
Suffolk County Chapter, Inc.**

SPONSORSHIP PACKAGE



A Women's Economic Empowerment Tea

My Sister's Keeper: A Financial Tools Workshop
Saturday, April 16, 2016, 8:30 AM – 2:30 PM

The Upsky Long Island Hotel
100 Vanderbilt Motor Parkway, Hauppauge, NY 11788

Suffolk County Chapter, Inc.
P.O. Box 346, Islip, New York 11751
www.ncbwsc.org



NATIONAL COALITION OF 100 BLACK WOMEN Suffolk County Chapter, Inc.

February 2016

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Dear Friend and Supporter;

The National Coalition of 100 Black Women, Suffolk County Chapter, Inc., will proudly host our *Women's Economic Empowerment Tea, "My Sisters Keeper: A Financial Tools Workshop."* This year's event will be held at the beautiful *Upsky Long Island Hotel* in Hauppauge on Saturday, April 16, 2016 from 8:30 AM to 2:30 PM. We invite you to be a part of this very special seminar by serving as a sponsor.

The purpose of the program is to enhance NCBW's mission to provide and support financial education and economic empowerment for women of color. The day will consist of a special plenary session, Keynote speaker, workshops, vendors and informational tables; a Continental Breakfast and Buffet Lunch included. All of these activities will combine to provide participants a day of information and tools to enable assessment of their personal financial status and entrepreneurship exploration.

We ask that you consider joining us on April 16, 2016 for what is certain to be an afternoon full of inspiration, motivation and networking! Please review the accompanying detailed Sponsorship Opportunities. We certainly appreciate your consideration of this information, and look forward to receiving your completed Registration Form to indicate your level of support.

The National Coalition of 100 Black Women, Inc. is a 501 (c) 3 organization whose mission is "to advocate on behalf Black women and girls to promote leadership development and gender equity in the areas of health, education and economic empowerment."

Please feel free to contact us with any questions that you may have concerning this event and its sponsorship. Thank you, again, for your kind consideration.

Best regards,

Dionne Walker-Belgrave
Melissa Guillaume
Co-Committee Chairs
Economic Development

Margaret "Peg" V. Davis
President, NCBW - SC Chapter
Margaretdavis1@optonline.net

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SPONSORSHIP OPPORTUNITIES

Presenting Tea Sponsor

\$3,500

Display your banner in most prominent location at event
Your company logo on all event advertising
Prominent name and logo placement on all printed materials related to event
Recognition as a sponsor on NCBW – Suffolk website for three (3) months
Preferred exhibit table space at event
Special photo opportunities
Keynote presentation at event
Four (4) event tickets

Gold Tea Sponsor

\$2,500

Free Standing Banner at Event
Your company logo on all event advertising
Logo placement on all printed materials related to the event
Recognition as a sponsor on NCBW – Suffolk website for two (2) months
Preferred Exhibit Table at Event
Photo Opportunities with honored Guests
45 minute presentation at Event
Three (3) event tickets

Silver Tea Sponsor

\$1,000

Free Standing Banner at Event
Your company logo on all event advertising
Logo placement on all printed materials related to the event
Prime Exhibit Table at Event
Two (2) event tickets

Bronze Tea Sponsor

\$500

Your company logo on all event advertising
Prime Exhibit Table at Event
Two (2) event tickets

Copper Tea Sponsor

\$250

Your company logo on all event advertising
Two (2) event tickets

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REGISTRATION FORM

Sponsorship Levels

Please indicate your level of participation.

Presenting Sponsor - \$3,500 _____

Gold Sponsor - \$2,500 _____

Silver Sponsor - \$1,000 _____

Bronze Sponsor - \$500 _____

Copper Sponsor - \$250 _____

_____ (# of) Individual Tickets
@\$35.00 = \$ _____

Contact Information

Name _____

Company/Affiliation _____

Address _____

Town/City _____ State _____ Zip Code _____

Phone _____ Email _____

Payment Method

_____ Check or Money Order (make payable to NCBW – Suffolk County Chapter)

_____ Credit Card AMEX MasterCard VISA

Card Number _____ Expiration Date _____

Name (as on credit card) _____

Billing Address _____ Town _____ State _____ Zip _____

Authorized Charge \$ _____ Authorized Signature _____