



## LEADERSHIP LUNCHEON SPONSORSHIP

\_\_\_\_\_ \$250    **HOST COMMITTEE** (2 tickets, name on program and marketing materials)\*

\_\_\_\_\_ \$1,250    **TABLE SPONSOR** (Reserved table of 10, name on all marketing materials)\*

\_\_\_\_\_ \$2,000    **MAJOR SPONSOR** (Reserved table of 10, special recognition, name on all marketing materials)\*

\* Please email the name, title, organization/affiliation and email address of each of your allotted attendees to [lcousin@nawj.org](mailto:lcousin@nawj.org) no later than April 12.

### HOST COMMITTEES

Host Committee Member Name/Title/Organization: \_\_\_\_\_

Attendee Ticket No.1 (Name/Title/Organization): \_\_\_\_\_

Attendee Ticket No.2 (Name/Title/Organization): \_\_\_\_\_

Host Committee Member Address: \_\_\_\_\_

Host Committee Member City/State/Zip: \_\_\_\_\_

Host Committee Member Email/Phone: \_\_\_\_\_

### FOR SPONSORS\*

Name of Sponsor: \_\_\_\_\_

Sponsor Address: \_\_\_\_\_

Sponsor City/State/Zip: \_\_\_\_\_

Sponsor Contact Name/Title: \_\_\_\_\_

Contact Email: \_\_\_\_\_ Phone: \_\_\_\_\_

### PAYMENT

Enclosed is a check payable to NAWJ for \$ \_\_\_\_\_

Credit Card No. (MasterCard/ Visa/AMEX): \_\_\_\_\_

Expiration: \_\_\_\_\_ Security Code: \_\_\_\_\_ Billing ZIP \_\_\_\_\_

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

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