



Saturday, February 13, 2021

11am – 9pm

Wings West Ice Arena

5076 Sports Drive

Kalamazoo, MI 49009

The South Central High School Hockey League (SCHSHL) and the Kalamazoo Optimist Hockey Association (KOHA) are partnering to host the 9th annual Youth Hockey Fights for Kids with Autism event. Proceeds from the event will benefit the Great Lakes Center for Autism Treatment and Research (GLC) whose mission is to partner with individuals and families affected by autism through effective and efficient diagnosis, assessment, and behaviorally-based treatment. Please join us in the fight by becoming a sponsor!

Sponsorship Opportunities

PRESENTING SPONSOR | \$10,000

- Speaking Opportunity at Event
- Logo Placement on KOHA and GLC Websites
- Corporate Banner Prominently Displayed at Event
- Corporate Name/Logo Included in all Event Communications
- Prominent Ad Placement on Back Cover of Event Program
- 6 sponsor reads throughout the event (sponsor to provide :10 copy)

PLATINUM SPONSOR | \$5,000

- Logo Placement on KOHA and GLC Websites
- Corporate Logo Included on Event Banner
- Corporate Name/Logo Included in all Event Communications
- Ad Placement within Event Program
- 4 sponsor reads throughout the event (sponsor to provide :10 copy)

GOLD SPONSOR | \$3,000

- Logo Placement on KOHA and GLC Websites
- Corporate Name/Logo Included in all Event Communications
- 2 sponsor reads throughout the event (sponsor to provide :10 copy)

SILVER | \$1,000

- Logo Placement on KOHA and GLC Websites
- Corporate Name/Logo Included in Post-Event Communications
- 1 sponsor read throughout the event (sponsor to provide :10 copy)

BRONZE | \$500

- Corporate Name/Logo Included in Post-Event Communications



SPONSOR INFORMATION

Sponsor Name _____

Contact Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ Email _____

SPONSORSHIP LEVELS

☐ Presenting \$10,000

☐ Silver | \$1,000

☐ Platinum | \$5,000

☐ Bronze | \$500

☐ Gold | \$3,000

Total: _____

METHOD OF PAYMENT

☐ Please Invoice (Payable on or before February 1, 2021)

☐ Check Enclosed (Made payable to: SCHSHL)

☐ Credit Card Payment

☐ MasterCard ☐ VISA ☐ AMEX ☐ Discover

Name of Card Holder _____

Address _____

City _____ State _____ Zip _____

Email _____

Phone _____

Card Number _____ Exp. _____ CVV _____

Signature _____

To receive all donor benefits, please return this form by February 1, 2021 to:

Stephanie Dukesharer

Marketing and Communications Director

Kalamazoo Optimist Hockey Association (KOHA)

5076 Sports Drive

Kalamazoo, MI 49009

s.dukes@koha.com

