

INTRODUCING....

SCWCEA

The logo for SCWCEA features the letters 'SC' in a light gray, sans-serif font. The 'S' and 'C' are partially filled with a blue map of the Southeastern United States. To the right of this, the letters 'WCEA' are written in a bold, blue, sans-serif font.

PARTNERS

**2008
SPONSORSHIP
OPPORTUNITIES**



PARTNERS PROGRAM

The South Carolina Workers' Compensation Educational Association is pleased to announce a new program beginning January 1, 2008. **SCWCEA PARTNERS** was developed to provide our workers' compensation community with opportunities to align itself with SCWCEA through customized marketing platforms. These bundled packages provide a dominant marketing exposure for our industry partners to help build and maintain year round relationships with our members and the association community.

After reviewing the enclosed information, we feel certain you will agree that your participation will yield a high level of creative visibility to the SCWCEA membership for a fraction of the normal cost and believe you will find this opportunity both beneficial and rewarding.

If you have any questions, please contact the SCWCEA office at 803.407.3360 or toll free at 866.459.4360. We look forward to your participation!

Sincerely,

Donna R. Croom
Executive Director

SPONSORSHIP ITEM	VALUE	LEVEL		
		PLATINUM \$5,500	GOLD \$4,000	SILVER \$3,000
Annual Firm/Business & Associate Memberships	Up to \$900	1 Firm/Business 15 Associate	1 Firm/Business 5 Associate	1 Firm/Business
Logo with Link on SCWCEA homepage	\$1,200	√	√	√
Ad in Educational Conference Program	\$750.00	Full Page	Half page	
Foursome at Annual Conference Golf Tournament	\$400.00	Two	One	
Hole Sponsor at Golf Tournament	\$200.00	√	√	√
Partner recognition in all related marketing collateral	\$600.00	√	√	√
Medical Seminar Complimentary Registration(s)	Up to \$585	Three	Two	One
One Day Seminar Complimentary Registration(s)	Up to \$300	Three	Two	One
Educational Conference Complimentary Registration(s)	Up to \$750	Three	Two	One
Partner Recognition at all SCWCEA Events		√	√	√
Mailing list usage/preprinted labels	\$150	Three times annually	Two times annually	Once annually
Pre-selection of booth locations if exhibiting at Medical Seminar and Educational Conference		√	√	
Opportunity to distribute promotional materials (subject to approval by SCWCEA)	\$800	√	√	√

VALUE	\$7,435	\$5,215	\$3,645
SAVINGS	\$1,935	\$1,215	\$ 645

SCWCEA is pleased to present the following **PARTNER** levels designed to offer year long recognition. Your support enables SCWCEA to continue to provide quality educational programs and professional networking opportunities. The following sponsor levels will apply to signature seminars and conferences throughout 2008.

Platinum Partner **\$5,500**

Firm/Business and Associate Memberships
Logo with link to Sponsor website on SCWCEA Homepage
Full page advertisement in Educational Conference Program
Two teams during Educational Conference Golf Tournament
Hole sponsor during Educational Conference Golf Tournament
Partner recognition in all related marketing material produced by SCWCEA
Three complimentary registrations to 2008 SCWCEA Medical Seminar
Three complimentary registrations to 2008 One Day Seminar (Spring)
Three complimentary registrations to 2008 Educational Conference
Partner Recognition from podium and with ribbons at all SCWCEA events
Mailing list usage and pre-printed labels three times annually
Pre-selection of booth location for exhibiting companies at 2008 Medical Seminar and Educational Conference
Opportunity to distribute promotional materials in conference registration packets
(subject to preapproval by SCWCEA)

Gold Partner **\$4,000**

Firm/Business and Associate Memberships
Logo with link to Sponsor website on SCWCEA Homepage
Half page advertisement in Educational Conference Program
One team during Educational Conference Golf Tournament
Hole sponsor during Educational Conference Golf Tournament
Partner recognition in all related marketing material produced by SCWCEA
Two complimentary registrations to 2008 SCWCEA Medical Seminar
Two complimentary registrations to 2008 One Day Seminar (Spring)
Two complimentary registrations to 2008 Educational Conference
Partner Recognition from podium and with ribbons at all SCWCEA events
Mailing list usage and pre-printed labels two times annually
Pre-selection of booth location for exhibiting companies at 2008 Medical Seminar and Educational Conference
Opportunity to distribute promotional materials in conference registration packets
(subject to preapproval by SCWCEA)

Silver Partner **\$3,000**

Firm/Business Membership
Logo with link to Sponsor website on SCWCEA Homepage
Hole sponsor during Educational Conference Golf Tournament
Partner recognition in all related marketing material produced by SCWCEA
One complimentary registrations to 2008 SCWCEA Medical Seminar
One complimentary registrations to 2008 One Day Seminar (Spring)
One complimentary registrations to 2008 Educational Conference
Partner Recognition from podium and with ribbons at all SCWCEA events
Mailing list usage and pre-printed labels one time annually
Opportunity to distribute promotional materials in conference registration packets
(subject to preapproval by SCWCEA)

The SCWCEA may solicit smaller, targeted sponsorships to be sold for specific events.



Partner Commitment Form

Please note that in order to be included during the 2008 Medical Seminar, a commitment will need to be made by February 1, 2008.

All Commitments must be paid in full by March 31, 2008.

CONTACT INFORMATION

POINT OF CONTACT: _____
(Individual to receive all correspondence and provide needed assistance to SCWCEA regarding sponsorship)

FIRM OR BUSINESS NAME: _____
(as it should appear on all collateral material)

ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIPCODE:** _____

PHONE: _____ **FAX:** _____

EMAIL: _____ **WEBSITE:** _____

PARTNER LEVEL

Platinum \$5,500 Gold \$4,000 Silver \$3,000

PAYMENT METHOD

Check: Made payable to SCWCEA (South Carolina Workers' Compensation Educational Association)

Credit Card MasterCard VISA AMEX Discover

Credit Card Number Expiration

Billing Address *(where monthly statements are received)* Authorized Signature