

Wisconsin Chapter, Healthcare Financial Management Association
2008-2009 Sponsorship Program

**Underwriting Recognition Program
 Commitment Form**

Sponsor/Underwriter Company Name _____

Contact Name _____

Contact Signature _____

Contact Phone Number _____

DO NOT PAY UNDERWRITING FEES FROM THIS COMMITMENT FORM.

All underwriting fees will be billed separately.

Underwriting opportunities are open to all interested parties on a first come-first serve basis with preference given to Chapter Sponsors in order of sponsorship level. In order for sponsor preference to be validated as received, this form must accompany a paid sponsorship and be received by the Sponsorship Committee no later than June 30, 2008.

Chapter Programs - Event Underwriting

Check the box for the event you wish to underwrite.

Continental Breakfast

Full Breakfast

Lunch

Thursday Cocktail

Dinner

Entertainment

Wednesday Night Reception

Price Each	Fall 2008 September	Winter 2009 January	Spring 2009 May
\$500			
\$750			
\$750			
\$1,000			
\$750			
\$750			
\$500			

Golf Outing - Hole Event Underwriting

*Check the box for the event you wish to underwrite.
 Underwriters for hole events*

Hole Sponsor

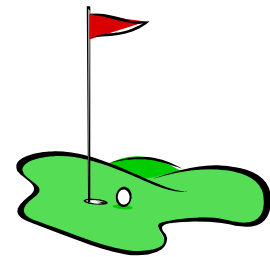
Practice Tee

Longest Drive

Longest Putt

Closest to Pin

Price Each	Fall 2008 Sep	Spring 2009 May
\$200		
\$200		
\$300		
\$300		
\$300		



Other

Directory Printing

Check YES if you want to underwrite a portion of the directory printing costs and have your company's name featured on the inside cover.

Price Each	Yes
\$1,000	