



Central Wisconsin

Down Syndrome Awareness Walk 2021

Sponsorship Opportunities

Proceeds benefit the life-changing programs and services of the Down Syndrome Association of Wisconsin

Sponsor Benefits	Platinum \$5,000	Gold \$2,500	Diamond \$1,000	Silver \$500	Bronze \$250	Fact Sign \$100
Naming rights to the Walk	✓					
Future VIP reception with DSAW leadership	✓					
Company logo placed on all pre-event materials	✓	✓				
Company representative to speak during opening ceremonies	✓	✓				
Recognition in all media opportunities	✓	✓				
Company sign at opening ceremonies	✓	✓				
Company sign at registration	✓	✓	✓			
Company sign displayed on the Walk grounds	✓	✓	✓	✓	✓	
Advertisement in Walk program	Back cover	1 page	1/2 page	1/4 page	1/8 page	
Year-long recognition through press release, Annual Report, newsletters, website, and social media	✓	✓	✓	✓	✓	
Company logo with link placed on Walk and DSAW websites	✓	✓	✓	✓	✓	
Company logo featured on back of event t-shirts	✓	✓	✓	✓	✓	
Sign along the Walk route with a fact about DS and your logo						✓

WE NEED YOUR HELP WITH RAFFLE ITEMS TOO!

September 25, 2021
Marathon Park, Wausau

Visit www.DSAW.org/events/centralwalk2021 for the latest details



dsaw
Down Syndrome
Association of Wisconsin, Inc.
awareness • acceptance • assistance
CENTRAL WI

DSAW-Central Wisconsin
c/o DSAW, Inc.
11709 W Cleveland Ave, Suite 2, West Allis, WI 53227
info@dsawcentral.org | facebook.com/dsawcentral

DSAW-Central Wisconsin

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Sponsorship/Marketing Agreement:

Contact Name _____

Title _____

Organization *(Exactly as you would like it to appear in print)* _____

Address _____

City _____ State _____ Zip _____

Phone _____ Fax _____

Email _____ Website _____

Signature _____ Date _____

My signature indicates authorization to make this commitment on behalf of my company

Marketing Contact Name _____ Email _____

Sponsorship Level:

Platinum Sponsor: \$5,000

Gold Sponsor: \$2,500

Diamond Sponsor: \$1,000

Silver Sponsor: \$500

Bronze Sponsor: \$250

Fact Sign: \$100

Underwriting of _____

In-Kind of _____

Please accept my donation in the amount of \$ _____

Other Donations:

We also need goods and services for our raffles! Consider donating:

Good/Service: _____ Value: \$ _____

Method of Payment:

Check enclosed *(Please make checks payable to DSAW)*

Visa Mastercard

Card # _____ 3 digit security code _____

Exp Date _____ Zip Code _____

Signature _____ Date _____

DSAW-Central Wisconsin

c/o DSAW, Inc.

11709 W Cleveland Ave, Suite 2, West Allis, WI 53227

Email: info@dsawcentral.org Phone: (414) 327-3729 Fax: (414) 327-1329

Marketing Purpose: The purpose of the event is to benefit the Down Syndrome Association of Wisconsin - Central Wisconsin programs and services and to advance its non-profit mission.

DSAW must receive this agreement form before August 31, 2021 in order for your company to receive sponsorship recognition. You may email or mail the form.