

**ITAC Health Queen's Park Digital
Health Day Reception 2017
May 09, 2017**

Sponsor Registration Form

Sponsor Contact Name: _____

Company Name: _____

Street Address: _____

City: _____ Prov: _____ Postal Code: _____

Telephone: _____ Facsimile: _____

Email: _____ Website URL: _____

Sponsorship Benefits

1. Your Company's Logo will be listed as a Sponsor on:
 - The ITAC Health Queen's Park Digital Health Day Reception website
 - Onsite and all other promotional and marketing material (please send a high resolution (jpg preferred) of your company's logo to Elaine Huesing – ehuesing@itac.ca)
2. Two reception registrations for a company representative to attend
3. Opportunity to have place company brochures and "swag" for hand-outs at the registration table

1st Name of representative for complimentary registration

First Name _____ Last Name _____
Title _____ e-mail: _____

2nd Name of representative for complimentary registration

First Name _____ Last Name _____
Title _____ e-mail: _____

Address if different from above:

Street Address: _____

City: _____ Prov: _____ Postal Code: _____

Description of Handout materials and or swag" : _____

Upon Receipt of your application you will be invoiced by ITAC for the full amount of the Sponsor Fee – \$ 2,000.00

Signature _____ Date _____ Title _____

Please complete this form and e-mail it back to Elaine Huesing at
E-mail: ehuesing@itac.ca , do not forget to include a copy of your logo.