

INFORMATION

Company/Organization Name: _____

Address: _____

City/Town: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Email: _____

Primary Contact: _____

- Resiliency Sponsor
 - \$6,000 \$ _____
- Connectedness Sponsor
 - \$3,000 \$ _____
- Strength Sponsor
 - \$2,000 \$ _____
- Hope Sponsor
 - \$1,000 \$ _____
- Exhibitor table *(No charge if one of the above-noted sponsorship levels)*
 - Planning partner
 - Non-profit agency or organization
 - For-profit agency, business or organization
 - Exhibitor Table Total** \$ _____
- Ad space in program *(No charge if one of the above-noted sponsorship levels)*
 - Planning partner
 - Non-profit agency or organization
 - For-profit agency, business or organization
 - Ad Space Total** \$ _____
- Name recognition *(*no ad space) (N/A if above-noted sponsorship)*
 - Name Recognition Total** \$ _____
- Payment Total** \$ _____

CHECKS PAYABLE TO "McLean County Treasurer" AND REGISTRATION FORMS CAN BE MAILED TO:
 Taylore Davis, Behavioral Health Coordination Project Coordinator
 200 W. Front Street, Ste 500-D
 Bloomington, IL 61701

**Forms and payment due by August 31, 2022 for sponsorships/ads and
 due by September 9, 2022 for Resource Fair (ONLY) participants.
 Ads emailed to taylore.davis@mcleancountyil.gov by August 31, 2022**