

## SPONSORSHIP REGISTRATION FORM

### 21ST TENNESSEE WORKERS' COMPENSATION EDUCATIONAL CONFERENCE

The Embassy Suites Nashville Southeast Hotel . . . June 6-8, 2018

#### SPONSORSHIP OPPORTUNITIES

You are invited to register as a sponsor for the 21st Tennessee Workers' Compensation Educational Conference. This conference is hosted by the Tennessee Bureau of Workers' Compensation and held in cooperation with the International Workers' Compensation Foundation, Inc., a non-profit organization (FEIN 35-1737364).

The following sponsorship levels are available (check one or more): **Amount**

- |   |          |
|---|----------|
| <input type="checkbox"/> <b>Silver: \$500 Contribution</b>  | \$ _____ |
| <ul style="list-style-type: none"><li>• Company name will appear on a large "Thank You Sponsor" sign in registration and exhibit areas.</li></ul>   |          |
| <input type="checkbox"/> <b>Gold: \$1,000 Contribution</b>  | \$ _____ |
| <ul style="list-style-type: none"><li>• Company name and address will appear on a large "Thank You Sponsor" sign in registration and exhibit areas.</li><li>• Company name and contact information will appear in conference program.</li><li>• Includes 1 complimentary attendee registration.</li></ul>   |          |
| <input type="checkbox"/> <b>Event: Contribution Amount Varies*</b> (check one or more)  |          |
| <ul style="list-style-type: none"><li>• Company name and address will appear on a large "Thank You Sponsor" sign in registration and exhibit areas.</li><li>• Company name and contact information will appear in conference program.</li><li>• Company name will appear on signage during the event chosen.</li><li>• Includes 2 complimentary attendee registrations.</li></ul> |          |
| <input type="checkbox"/> <b>PM Break (Day 1): \$2,500</b>   | \$ _____ |
| <input type="checkbox"/> <b>Breakfast (Day 2): \$3,000</b>  | \$ _____ |
| <input type="checkbox"/> <b>AM Break (Day 2): \$2,500</b>   | \$ _____ |
| <input type="checkbox"/> <b>Luncheon (Day 2): \$10,000</b>  | \$ _____ |
| <input type="checkbox"/> <b>PM Break (Day 2): \$2,500</b>   | \$ _____ |
| <input type="checkbox"/> <b>Breakfast (Day 3): \$3,000</b>  | \$ _____ |
| <input type="checkbox"/> <b>AM Break (Day 3): \$2,500</b>   | \$ _____ |

*\*Joint sponsorships accepted for all EVENTS.*

***Sponsorship form must be received no later than May 7, 2018, along with company logo and contact information.***

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Sponsorship Contact Name \_\_\_\_\_  
 Title \_\_\_\_\_  
 Company \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Telephone \_\_\_\_\_ Email \_\_\_\_\_

*(Please print exact company name as you wish it to appear on signage)*

***Gold and Event Sponsor Only - Complimentary Attendee***

Name \_\_\_\_\_  
 Title \_\_\_\_\_  
 Company \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Telephone \_\_\_\_\_ Email \_\_\_\_\_

***Event Sponsor Only – Second Complimentary Attendee***

Name \_\_\_\_\_  
 Title \_\_\_\_\_  
 Company \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Telephone \_\_\_\_\_ Email \_\_\_\_\_

*Please make/mail check payable to:*

IWCF

570 Memorial Circle, Suite 320, Ormond Beach, FL 32174

Telephone: (386) 677-0041; Fax: (386) 677-0155; Email: [IWCF@bellsouth.net](mailto:IWCF@bellsouth.net); Web: [www.iwcf.us](http://www.iwcf.us)

***Sponsorship form must be received no later than May 7, 2017, along with company logo and contact information.***

**CONTACT THE IWCF FOR INFORMATION ON *EXHIBIT* OPPORTUNITIES  
AND COMPLETE CONFERENCE INFORMATION**