



National Alliance on Mental Illness

Illinois

DRIVING CHANGE: THE NEW FUTURE OF MENTAL HEALTH

The world changed in early 2020 and with it, our future. The landscape of mental health has been inalterably impacted. The NAMI Illinois 2020 State Conference, **Driving Change: The New Future of Mental Health**, will examine what this means for all of us. NAMI brings together leaders, advocates, and participants in the mental health system to explore how to face—and shape—this new future.

2020 NAMI ILLINOIS ANNUAL CONFERENCE

The National Alliance on Mental Illness (NAMI) Illinois presents its annual state conference for the people who are affected by mental health challenges: those living with mental illness, their families, mental health professionals, and those who advocate for mental health services.

Investing as a partner with NAMI Illinois will ensure you receive recognition at this well-attended conference—more than 200 participants are expected—and on the NAMI Illinois website. By partnering with NAMI Illinois, you will reach new clients, demonstrate your support of mental health issues, empower us to advocate for areas of concern regarding mental illness and provide necessary registration scholarships to individuals in need.

NAMI ILLINOIS MISSION

NAMI Illinois is a grassroots organization working to improve the quality of life for all by providing support, education and advocacy for people affected by mental illness.



www.namiillinois.org

Techny Towers, 2001 Waukegan Road, Northbrook, IL

www.namiillinois.org

CONFERENCE DATES: Friday, October 16 and Saturday, October 17

CONTACT INFORMATION (Please type or print legibly. Form must be fully completed.)

Company _____		Display Name (as it should appear on all conference materials) _____	
Address _____		City _____	State _____ Zip _____
Website _____	Twitter Handle _____	Facebook Page _____	Instagram Profile _____
Sponsor Contact _____		Phone _____	Email Address (Required) _____
Payment Contact <input type="checkbox"/> Same as Above _____		Phone _____	Email Address (Required) _____
Day-of-Event Contact (OnSite/Pre-Event Info) <input type="checkbox"/> Same as Above _____		Mobile Phone _____	Email Address (Required) _____

PAYMENT INFORMATION Cash Check Payable to NAMI Illinois [Credit Card](#)

Credit Card Number _____	Expiration Date _____	Security Code _____
Credit Card Holder Name _____	Billing Address _____	Card Holder Signature _____

SELECT LEVEL OF SPONSORSHIP PARTICIPATION See reverse side for detailed sponsor benefits

Sponsorship Amount	
<input type="checkbox"/> Mental Health Champion: \$10,000	\$ _____
<input type="checkbox"/> Mental Health Pioneer: \$7,000	\$ _____
<input type="checkbox"/> Mental Health Reformer: \$5,000	\$ _____
<input type="checkbox"/> Mental Health Advocate: \$3,000	\$ _____
<input type="checkbox"/> Mental Health Supporter: \$1,500	\$ _____
Exhibitor	Amount
<input type="checkbox"/> Two Day Corporate: \$500	\$ _____
<input type="checkbox"/> One Day Corporate: \$250	\$ _____
<input type="checkbox"/> Two Day Non-Profit Organization: \$350	\$ _____
<input type="checkbox"/> One Day Non-Profit Organization: \$150	\$ _____
<input type="checkbox"/> Corporate Resource Center: \$200	\$ _____
<input type="checkbox"/> Non-Profit Resource Center: \$75	\$ _____
Advertiser	Amount
<input type="checkbox"/> Full Page: \$1,000	\$ _____
<input type="checkbox"/> Half Page: \$600	\$ _____
<input type="checkbox"/> Quarter Page: \$350	\$ _____
<input type="checkbox"/> Business Card: \$250	\$ _____
TOTAL AMOUNT DUE	\$ _____

Sponsorship benefits cannot be activated until this form is signed below and payment are received.

Registration and payment should be submitted to:

Big Buzz Idea Group
Attn: 2020 NAMI Illinois Annual Conference
4055 W. Peterson Ave., Suite 105
Chicago, IL 60646

OR

Email: Amanda@BigBuzzIdeaGroup.com

If you have any questions about 2020 NAMI Illinois Annual Conference, please contact Amanda@BigBuzzIdeaGroup.com.

For maximum exposure, send sponsor logos by August 28, 2020 to: Amanda@BigBuzzIdeaGroup.com.

Please check this box and sign below that you have reviewed this form in full and agree to the sponsor outline as presented.

SPONSOR SIGNATURE

DATE

SPONSORSHIP LEVELS AND BENEFITS**MENTAL HEALTH CHAMPION (\$10,000)—Two Available**

All the benefits of Mental Health Pioneer, plus:

- Sponsor of Keynote Address
- Branding of Keynote Stage
- Ability to address the audience at one of the Keynote Addresses
- Conference registration for 10 people

MENTAL HEALTH PIONEER (\$7,000)

All the benefits of Mental Health Reformer, plus:

- Naming rights to a Lunch (2 available), the Hall of Fame Reception or a Session Room
- Recognition from stage at Conference Keynote Address
- Sponsor Recognition in all Conference Promotion, including eblasts and press releases
- Logo on Keynote Signage
- Premium Placement of Full-Page Ad in the Program
- Conference registration for seven people

MENTAL HEALTH REFORMER (\$5,000)

All the benefits of Mental Health Advocate, plus:

- Naming rights to the Speaker Lounge, an Exhibitor Room or the Art Program
- Full-Page Ad in the Program
- Conference registration for five people

MENTAL HEALTH ADVOCATE (\$3,000)

All the benefits of Mental Health Supporter, plus:

- Naming rights available: Registration Sponsor, Bag Sponsor, or Passport Sponsor
- Sponsor Signage with logo at the Registration Desk
- Logo and link included on website
- Logo in Conference marketing materials
- Logo in Conference Program
- Half-Page Ad in the Program
- Conference Registration for four people

MENTAL HEALTH SUPPORTER (\$1,500)

- Exhibitor table at Conference (includes all benefits associated with an Exhibitor)
- Company name and link included on website
- Recognition in Conference eblasts
- Name in Conference Program
- Quarter-Page Ad in the Program
- Conference registration for two people

EXHIBITION OPPORTUNITIES**EXHIBITOR: ALL EXHIBITORS, ONE OR TWO DAYS**

- Six-foot table with linen, skirting and two chairs
- Listing in program materials and on website
- Registration for one person the conference
- Additional conference tickets can be purchased at the Exhibitor Discount of \$80 for one day and \$110 for two days

RESOURCE CENTER

- Place materials about your program at the Resource Desk

ADVERTISERS

- Artwork for your ad should be created in CMYK at the print size of the ad and at 300 ppi/dpi.
- Please, no MS Word, MS Publisher documents, images embedded in a Word document, or web images as they will produce poor quality print images.
- Adobe PDF files are preferred, Press Quality or PDFx1a output recommended. Also acceptable are JPGS/TIFFs at 300 ppi, and vector eps files with all fonts converted to outlines and spot colors converted to CMYK.

AD SIZES

- Full-page: 7.5 x 10 inches
- Half-page: 7.5 x 5 inches
- Quarter-page: 3.75 x 5 inches
- Business Card: 3.5 x 2 inches

Ad artwork must be submitted no later than September 18, to Amanda@BigBuzzIdeaGroup.com.

IN-KIND DONATION

Sponsorship benefits may be awarded at the market value equivalent to the dollar value of the donation. Suggested donation items may include, door prizes, printing, advertising, conference production supplies and signage.

All In-Kind Donations and value/sponsor benefit assignments are subject to approval of NAMI Illinois.

Contact Amanda at Big Buzz Idea Group, (773) 804-8589 or email Amanda@BigBuzzIdeaGroup.com, with any questions regarding the 2020 NAMI Illinois Annual Conference.