

DATE _____

SPONSOR NAME
*Exactly as you would
like printed* _____

CONTACT NAME _____

ADDRESS _____

CITY, STATE ZIP _____

EMAIL ADDRESS _____

PHONE _____

We must have your signed sponsorship agreement and payment by July 31, 2026 to be included in the conference program.

SPONSORSHIP OPPORTUNITIES

Lake Superior - \$1,500
Circle one: Friday lunch, Saturday lunch, Friday or Saturday education programs or Service Fair, Friday and Saturday

Lake Huron - \$1,000
Circle one: Sponsorship of either Friday, Saturday or Sunday breakfast

Lake Michigan - \$750
Circle one: Thursday night District Board Dinner or Conference lanyards

Lake Erie - \$500

Lake Ontario - \$300

Service Fair Table - \$100

Please bill my Mastercard Visa AMEX Discover Total Amount: _____

CARDHOLDER NAME _____ SIGNATURE _____
CARD NUMBER _____ EXP DATE _____ CVC CODE _____

Attached is a check made payable to MICHIGAN DISTRICT OF KIWANIS.
P.O Box 231
Mason, MI 48854-0231

Please invoice me at the details I have provided.

Questions? Email districtoffice@mikiwanis.org