

Sponsorship Form

Organization: _____

Contact Person: _____

Phone: _____ Email: _____

Strategic Areas to Support:

GOVERNMENT RELATIONS \$ _____

These are some of the initiatives we could implement with your contribution:

- Host a Spring Queen's Park Reception
- Host up to two Queen's Park Breakfasts
- Update the Co-operative Economic Impact Study
- Update Factsheets and Guide to the Act
- Regional MPP BBQs

AWARENESS BUILDING \$ _____

These are some of the initiatives we could implement with your contribution:

- Social Media Campaign
- Targeted Advertising
- Media Releases

EDUCATION & TRAINING \$ _____

These are some of the initiatives we could implement with your contribution:

- New employee on-boarding module
- Governance Symposium
- Co-operative Young Leaders & Base Camp Program Development
- All 4 Each Curriculum Development

CO-OPERATIVE DEVELOPMENT \$ _____

These are some of the initiatives we could implement with your contribution:

- Co-op Development Incubator
- Regional Co-op Networks
- Regional Conference

NO HST is applied on Strategic Area Sponsorships (this page only)

Co-operative Young Leaders:

CYL PARTICIPANT SPONSOR

Junior Participant: _____ x \$ _____ = \$ _____

Intermediate Participant: _____ x \$ _____ = \$ _____

Senior Participant: _____ x \$ _____ = \$ _____

Base Camp Participant: _____ x \$ _____ = \$ _____

HST = \$ _____

CYL WEEKLY SPONSOR \$3,000

\$ _____

HST \$ _____

BASE CAMP SPONSOR \$1,500

\$ _____

HST \$ _____

CYL ACTIVITY SPONSOR

\$ _____

HST \$ _____

- Facilitator Training
- Improv workshop
- Guest speakers
- Swimming
- Yoga

All 4 Each:

ALL 4 EACH DELIVERY PARTNER \$5,000

\$ _____

HST \$ _____

Membership Dues* (For New Members or Change of Category):

Co-op Champion (Min. \$50,000) \$ _____

Co-op Leader (Min. \$10,00) \$ _____

Co-op Booster (Min. \$5,000) \$ _____

Co-op Supporter (Min. \$500) \$ _____

Friend (\$75 - \$500) \$ _____

Associate (Min. \$500) \$ _____

HST \$ _____

*If you are already a member of OCA, your dues will be billed automatically in 2020 based on your previous year's dues contribution.

Sponsorship Total

Subtotal (all pages) \$ _____

HST (13%) \$ _____

Total \$ _____

I hereby authorize an invoice to be created by OCA and sent to my organization for the amount indicated above.

Print Name

Signature

Date

An invoice will be created and sent for the total amount in January 2020. If you would like to be invoiced immediately, please let us know.