



Dear Potential Sponsor/Exhibitor,

The Oregon Association of Health Underwriters would like to invite you to participate as a Sponsor or Exhibitor for the **OAHU VIRTUAL Northwest Medicare Summit to be held on September 14-15, 2020.**

The Oregon Association of Health Underwriters (OAHU) is a non-profit organization of insurance professionals dedicated to serving the public through strengthening the insurance marketplace, advocating for effective legislation, ethical leadership and professional standards, and by educating our members and the consumers they serve. OAHU is the state's largest association for health insurance agents, brokers and other professionals. Our members help millions of Oregonians find, purchase and use their health care coverage, resulting in greater health and financial security. We recognize the health care system can be overwhelming for consumers who interact with it only occasionally.

This is a great opportunity for you to increase awareness of your company and the products and/or services you offer to those with the most influence in the health insurance Agent/Broker community in the Pacific Northwest. This is an excellent business opportunity and a way to show your support for our industry. Don't miss this unique chance to introduce your products or services to this important buying group.

On behalf of the OAHU Board of Directors, we would like to thank you in advance for your continued support of OAHU.

Thank you for your consideration,

Ryan Neace
2020 OAHU Northwest Medicare Summit Chair



OAHU 2020 Virtual Northwest Medicare Summit Sponsorship Opportunities

September 14 - 15, 2020

Sponsorship Opportunities	
<p>Platinum Sponsor - \$4,000</p> <ul style="list-style-type: none"> ➤ Virtual trade show booth ➤ (4) Complimentary Medicare Attendee Registrations ➤ Full page color advertisement in Event Program ➤ Logo on all event marketing materials ➤ Logo placement on Event home page ➤ Visibility has Platinum Sponsor ➤ 3 minutes of podium time at opening ceremonies ➤ Provide speaker at 1 break out session (presentation to be approved by OAHU) ➤ Certification Course (certification to be approved by OAHU) ➤ (1) Company promotion item/swag that is provided by sponsor and will be delivered to attendee pre-conference. ➤ Social media banners ➤ Attendee list 	SOLD
<p>Gold Sponsor - \$3,000</p> <ul style="list-style-type: none"> ➤ Virtual trade show booth ➤ (4) Complimentary Medicare Attendee Registrations ➤ Full page color advertisement in Event Program ➤ Logo on all event marketing materials ➤ Logo placement on Event home page ➤ Visibility as Gold Sponsor ➤ Happy hour host day before event ➤ (1) Company promotion item/swag that is provided by sponsor and will be delivered to attendee pre-conference. ➤ Social media banners ➤ Attendee list 	SOLD
<p>Silver Sponsor - \$2,500</p> <ul style="list-style-type: none"> ➤ Virtual trade show booth ➤ (2) Complimentary Medicare Attendee Registrations ➤ ½ page black & white advertisement in Event Program ➤ Logo on all event marketing materials ➤ Visibility as Silver Sponsor ➤ (1) Company promotion item/swag that is provided by sponsor and will be delivered to attendee pre-conference. ➤ Attendee list 	SOLD
<p>Event Program Sponsor - \$1,500</p> <ul style="list-style-type: none"> ➤ Virtual Trade Show Booth ➤ (2) Complimentary Medicare Attendee Registrations ➤ ¼ page black & white advertisement in Event Program ➤ Logo on all event marketing materials ➤ (1) Company promotion item/swag that is provided by sponsor and will be delivered to attendee pre-conference. ➤ Attendee list 	SOLD
<p>AM or PM Break Sponsor - \$1,000 each</p> <ul style="list-style-type: none"> ➤ Virtual Trade Show Booth ➤ (2) Complimentary Medicare Attendee Registrations ➤ Branded Trivia / Global Chat room ➤ ¼ page B&W advertisement ➤ Logo on all event marketing materials ➤ (1) Company promotion item/swag that is provided by sponsor and will be delivered to attendee pre-conference. ➤ Attendee list 	SOLD
<p>Virtual Exhibitor - \$650 each</p> <ul style="list-style-type: none"> ➤ Virtual Trade Show Booth ➤ (2) Complimentary Medicare Attendee Registrations ➤ (1) Company promotion item/swag that is provided by exhibitor and will be delivered to attendee pre-conference. ➤ Medicare Summit Attendee List 	(25 Available)
<p>Attendee Swag Bag All Medicare Attendees will receive a special swag package to their home/office before the event date.</p>	



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September 14 -15, 2020

Company (exactly as it should appear on all materials): _____
Contact Person: _____ Title: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: _____ Fax: _____
Email: _____ Website: _____

Sponsorship Package Selection

- | | |
|---|-------------|
| <input type="checkbox"/> Platinum Sponsor | SOLD |
| <input type="checkbox"/> Gold Sponsor | SOLD |
| <input type="checkbox"/> Silver Sponsor | SOLD |
| <input type="checkbox"/> Event Program Sponsor | SOLD |
| <input type="checkbox"/> AM or PM Break Sponsor | SOLD |
| <i>Please circle your break choice: PM</i> | |
| <input type="checkbox"/> Virtual Exhibitor | \$650 |

Total Amount Due \$ _____

Requirements and Terms:

- All sponsorships must be paid in full 30 days prior to printing of event materials.
- All sponsorships are sold on first-come, first-served basis. OAHU reserves the right to assign sponsorships.
- By submitting the Sponsorship Agreement form to the OAHU, I understand and agree to the provisions and terms and conditions as listed on this agreement and am authorized to execute this Sponsorship Agreement on behalf of my company.
- Cancellation policy: Any cancellations received 30 days prior to event date will receive a 50% refund. Any cancellations received after that will not receive a refund.

PAYMENT: Check (payable to OAHU) or **Credit Card** Visa MasterCard American Express Discover

Card Number: _____ Exp. Date: _____ Amount Authorized: \$ _____
Cardholder Name: _____ Signature: _____
Address: _____ CVV #: _____
City: _____ State: _____ Zip: _____
Phone: _____ Email: _____

Send completed form with payment to OAHU at:
147 SE 102nd Avenue, Portland OR 97216
or fax form to 503.253.9172