Indian Aledical Association of Northwest Indiana

c/o Sanjay Raikar, M.D. • 8605 Merrillville Road • Merrillville, Indiana 46410 • www.nwiima.org

Please fill out the following information regarding sponsorship and advertisement in the souvenir booklet for the 42nd Annual Indian Medical Association Dinner and Cultural Program to be held on Saturday, October 26, 2024, at the Halls of St. George - 905 E Joliet St, Schererville, IN.

Name of Business/Organization			
Contact Person			
Contact Email		Contact Phone	
Address	City	State	Zip
SPONSORSHIP (CHECK BOX)			
TYPE	COST	INCLUDES	
☐ DIAMOND SPONSOR	\$22,000	2 Tables of 10, Full Color Inside Front Cover AND Page 1 Ad in Souvenir Book (2 Total Ads	
☐ EMERALD SPONSOR	\$15,000	2 Tables of 10, Full Color Back Cover Ad in Souvenir Book	
☐ SAPPHIRE SPONSOR	\$10,000	2 Tables of 10, Full Color Page 2 Ad in Souvenir Book	
■ BAR SPONSOR	\$5,000	1 Table of 10, Gold Page Ad	
☐ TABLE WINE SPONSOR	\$5,000	1 Table of 10, Gold Page Ad	
☐ CENTERPIECE SPONSOR	\$5,000	1 Table of 10, Gold Page Ad	
☐ HORS D'OEUVRES SPONSOR	\$5,000	1 Table of 10, Full Page Ad (Black & White)	
ADVERTISING (CHECK BOXES) TYPE (CHOOSE ONE) Full Page - Color (4 ¹ / ₂ x 7 ¹ / ₂) Full Page - Gold (4 ¹ / ₂ x 7 ¹ / ₂) (Black and White Ad with Gold Bor Full Page - Black & White (4 ¹ / ₂ x	71/2) \$650	ads@qualityimpressionsinc.com OR mail a copy to c/o IMA 8605 Merrillville Rd., Merrillville, IN 46410 File/Art Questions ONLY: 219-663-6700 (Judy/Megan)	
☐ Half Page - Color $(4^{1}/_{2} \times 3^{3}/_{4})$ ☐ Half Page - Black & White $(4^{1}/_{2} \times 3^{3}/_{4})$	\$550 . 73/ \ \$750	Please review ad size & file requirements before sending final artwork.	
ARTWORK (CHOOSE ONE) Advertising same as last year Changed from last year (Print-Red) New Advertisement (Print-Read	eady File: <u>High</u>	ARTWORK IS Resolution PDF*)	S DUE ON 10/7/24
Advertising Co	st \$		
TICKET INFO (CHECK BOX)		Construction	Φ.
	ickets		\$
☐ \$1100 (Table of 10)			\$
			\$
大学的 (2014年) 1984年 (2014年)			\$
We are enclosing	g our check in	the amount of	\$
SCAN TO PAY O	NLINE		

Please make check payable to Indian Medical Association of NWI (tax payer ID 31-4130002) and mail to the above address. We would appreciate receiving this form as soon as possible but no later than October 7, 2024. **If you have any questions regarding tickets, ads or table reservations** please contact Katie Boyle at 219-617-5432 / indianmedicalassociation.katie@gmail.com or Dr. Sanjay Raikar at 773-727-9625 / sanjuraikar@gmail.com