



2018 AEDF Annual Business Luncheon

Tuesday, December 4, 2018 • 11:30am – 1:00pm
English Turn Golf & Country Club
1 Clubhouse Drive, New Orleans, LA 70131



S P O N S O R S H I P L E V E L S

(1) Gold Sponsor - \$5,000 Investment

VIP Table for 10 & Sponsor table sign
Opportunity for Meet & Greet Keynote (*Gov. John B. Edwards*)
Logo placement on invitation letter to the community & stakeholders
Logo placement on all luncheon promotional and program signage
Presenting Gold Sponsor listing in AEDF Annual Report
Exhibit table at Luncheon Networking Reception
Recognition during luncheon program as the Gold Sponsor
Remarks or presentation during luncheon program
Opportunity to distribute collateral materials to over 300 guests
2018 AEDF Business Membership

(3) Silver Level Sponsor - \$2,500 Investment

Priority Seating - Reserved table for 10 & Sponsor table sign
Listing on invitation letter to the community & stakeholders
Logo placement on all luncheon promotional and program signage
Silver Level Logo in AEDF Annual Report
Exhibit table at 2017 Luncheon Networking Reception
Recognition during luncheon program as the Silver Sponsor
2018 AEDF Business Level Membership

Bronze Level Sponsor - \$1,500 Investment

Priority Seating - Reserved table for 10 & Sponsor table sign
Bronze Level Logo on all luncheon promotional and program signage
Bronze Level Sponsor Listing in AEDF Annual Report
Exhibit table at 2017 Luncheon Networking Reception
2018 AEDF Membership

Friends Level Sponsor - \$750 Investment

Reserved table for 10
Company name on table sign
Friends Level Sponsor listing in luncheon program

Individual Tickets

AEDF Member Ticket \$55
Non-Member Ticket \$65

Sponsorships and Table Reservations must be confirmed by November 19, 2018

501 (c) 3 Organization Tax ID 72-1275640

Remit to:

Algiers Economic Development Foundation
3520 General DeGaulle Dr. Ste. 1100 New Orleans, LA 70114
Tel: 504-362-6436 Email info@algierseconomic.com

Check one: Gold Silver Bronze Friends Individual Ticket(s)

Company _____

Name _____

Address _____ City, State, Zip _____

Phone _____ Email _____

Print Names of Guests _____
(Use Additional Paper as Necessary)

Please list special dietary needs _____

_____ Check Enclosed Payable to: **Algiers Economic Development Foundation** Amount Enclosed \$ _____

Visa/MasterCard number _____ Expiration _____ CVC Security Code _____

Name (as it appears on card) _____ Billing Address _____

I authorize \$ _____ to be charged on my credit card outlined above. City, State, Zip _____

PLEASE NOTE: Up to 3.5% Processing Fee will be applied to each sale.

Signature _____

Date _____