



**Carolina-South
Atlantic Chapter**

Sponsorship Request

THERAPEUTIC THURSDAY

Give your company great exposure at one of ISPE-CaSA's monthly Therapeutic Thursdays! Don't miss this chance to connect with CaSA professionals in an informal, comfortable setting. An event featuring food and beverages at a restaurant or other entertainment venue allows networking among ISPE-CaSA members, as well as non-members, to promote the industry and form relationships.

Date of Sponsorship MM/DD/YY: _____ **Time from/to:** _____
Location of Sponsorship (Name & Address): _____

Sponsorship: \$150 – includes name recognition in marketing, signage on site at registration table, and public recognition from CaSA board members at the event. *(Please submit high resolution logo for promotional purposes.)*

(Note: Any sponsor give-aways must be pre-approved by ISPE-CaSA prior to the event.)

Contact Name: _____ **Phone:** _____ **Email:** _____

Company: _____

Address: _____ **City, State, Zip** _____

Make checks payable to: ISPE-CaSA **Amount:** \$ _____

Or pay by credit card: Discover Visa Master Card AMEX

Credit Card #: _____

CC Exp. Date: _____

**Return completed form and logo to: ISPE-CaSA, 1500 Sunday Dr, Ste 102, Raleigh, NC
27607**

Phone (919) 573-5442 Fax: (919) 787-4916 info@ispecasa.org

For office use only:

ISPE-CaSA GL 1003552/000-2200

Amount \$ _____ Ck# _____ CC _____ Entered _____ Initials _____