



STAND UP FOR INNOCENCE

Laugh out loud at an evening of standup comedy while supporting the Innocence Project of Florida's work to find and free the wrongfully convicted in Florida's prisons.

FEBRUARY 22, 2020

Reception 7pm Show 8pm

American Heritage School
12200 W Broward Blvd
Plantation, FL 33325



SPONSORSHIP OPPORTUNITIES

SPONSORSHIP BENEFITS	\$7,500	\$5,000	\$2,500	\$1,000
Pre-Event Recognition				
Website Recognition*	✓	✓	✓	✓
Printed Materials Recognition*	✓	✓	✓	✓
Social Media Recognition**	✓	✓	✓	✓
On-Site Event Recognition				
Advertisement in program	Full Page	Half Page	Quarter Page	
Logo Displayed on Sponsor Board	✓	✓	✓	✓
Reserved Seating	Front Row	Front Row	Premiere	Preferred
Complimentary Show Tickets	20 tickets	15 tickets	10 tickets	4 tickets
Complimentary Reception Tickets	20 tickets	15 tickets	10 tickets	4 tickets

Please select a sponsorship level and complete a sponsorship commitment form either online at FloridaInnocence.org/StandUpFLL or via the attached PDF Form by February 3, 2020.

If you would like to discuss an alternative level of support or in-kind donation please contact Kelleigh Helm, IPF Development Coordinator, at 850.561.6767 ext. 1005 or by email at KHelm@FloridaInnocence.org

*Logo & Name included on our website and printed materials for 1 year from date of event.

**Logo and Name included on our social media and email promotions for period leading up to the event.



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SPONSORSHIP COMMITMENT FORM

Yes, I would like to sponsor the Innocence Project of Florida's 2020 Stand Up for Innocence Comedy Show at the following level:

- ☐ \$7,500 Freedom
☐ \$5,000 Justice
☐ \$2,500 Partner
☐ \$1,000 Friend

SPONSORSHIP CONTACT INFORMATION

Sponsorship Contact Person: _____

Organization or Company: _____

How you or company would like name displayed at Event, and on Digital and Printed Materials:

Address: _____

City: _____ State: _____ Zip: _____

Day Phone(s): _____

Email(s): _____

Preferred Time of Day to reach you: _____ Preferred Days to reach you: _____

PAYMENT INFORMATION

- ☐ Check payable to the Innocence Project of Florida is enclosed.
☐ Sponsorship Purchased online at FloridaInnocence.org/Stand-Up-2020
☐ Please send me an invoice, and I will remit payment.
☐ Please charge my (circle option): AMEX VISA MASTERCARD DISCOVER

Card Number: _____ Expiration Date: _____

Name on Card: _____ Security Code: _____

Billing Address for Card (please select a box):

- ☐ Same as above
☐ New Address: _____
City: _____ State: _____ Zip: _____