

40
YEARS



WESTSHORE
ALLIANCE
TAMPA BAY

ANNUAL MEETING

presented by Highwoods Properties

February 1, 2024

Raymond James Stadium

4:30 to 7pm



SPONSORSHIP OPPORTUNITIES

SPONSORSHIP LEVELS



ANNUAL MEETING
FEBRUARY 1, 2024

BENEFITS	Giveaway (Exclusive) \$5,000	Bar (Exclusive) \$5,000	Partner \$2,500	Ally \$1,500	Supporter \$600
BRANDED MARKETING MATERIALS & SIGNAGE	SOLD	SOLD			
MEMBER SPOTLIGHT IN E-NEWSLETTER	•	•			
VERBAL RECOGNITION IN OPENING REMARKS	•	•	•		
LOGO ON STADIUM JUMBOTRON	•	•	•		
RECOGNITION ON DIGITAL BANNERS & BOARDS	LOGO	LOGO	LOGO	NAME	
RECOGNITION IN PRESENTATION	EXCLUSIVE LOGO	LOGO	LOGO	NAME	
SOCIAL MEDIA INCLUSION	LOGO	LOGO	LOGO	NAME	
RECOGNITION IN TBBJ EVENTS CALENDAR	LOGO & LINK	LOGO & LINK	LOGO	NAME	
RECOGNITION IN TBBJ ADVERTISEMENT	LOGO	LOGO	LOGO	NAME	
RECOGNITION IN PRE/POST-EVENT DIGITAL MARKETING	LOGO & LINK	LOGO & LINK	LOGO & LINK	LOGO	NAME
EXCLUSIVE SPONSOR NAME BADGE	•	•	•	•	•
EVENT TICKETS	8	8	8	6	2

TBBJ Ad commitment deadline 1/12/24



Corner Board and Jumbotron



Bar Sponsor

SPONSORSHIP AGREEMENT



Choose an option to complete this form:

Complete online by clicking here.	Complete, print and mail to: Westshore Alliance, Attn: Jamie Farrell, 3109 W. Dr. MLK Jr. Blvd., Suite 140, Tampa, FL 33607	Complete, scan and email to: Jamie Farrell at Farrell@westshorealliance.org
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Name: _____ Title: _____

Company Name: _____

Phone Number: _____ Email Address: _____

My company would like to participate at the following level:

<input type="checkbox"/> \$5,000	Giveaway (exclusive) 8 event tickets	<input type="checkbox"/> \$5,000	Bar (exclusive) 8 event tickets
<input type="checkbox"/> \$2,500	Partner 8 event tickets	<input type="checkbox"/> \$1,500	Ally 6 event tickets
<input type="checkbox"/> \$600	Supporter 2 event tickets	<input type="checkbox"/> \$100 <input type="checkbox"/> \$175	Additional Tickets price per ticket Non-Member Qty _____

Payment Information:

Total Commitment \$ _____

☐ **Check** Made payable to Westshore Alliance

☐ **Request Invoice**

☐ **Credit Card** Include details below



Account Number: _____ Expiration Date: ____/____ CVC Code: _____

Name on Card: _____ Signature: _____
I consent to my credit card being charged.

Billing Address: _____ Billing Zip Code: _____

Email Address for Receipt: _____

For more information, please contact Jamie Farrell at 813-289-5488 x105 or 516-424-6498 (mobile)