

# Sponsorship Application Form



CANADA CHAPTER  
**community**  
ASSOCIATIONS INSTITUTE

**October 26, 2017**

**Parkview Manor**

**55 Barber Greene Rd., #1, Toronto, Ontario**

**INCREASE YOUR CORPORATE VISIBILITY WITH A GOLD OR SILVER SPONSORSHIP**

Receive recognition at the event during seminar and on the program, company logo on powerpoint presentation at the event and on chapter website and promotional items at each attendee seat

<b>GOLD SPONSORSHIP (2 available)</b> <b>\$2000</b>	<b>SILVER SPONSORSHIP</b> <b>\$1000</b>
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Or choose from one of the sponsorship opportunities below

<b>Table Sponsor</b> <b>\$450</b>	<b>Notepad Sponsor</b> <b>\$350</b>	<b>Pen Sponsor</b> <b>\$350</b>	<b>Exhibit Sponsor</b> <b>\$250</b>
<ul style="list-style-type: none"> <li>- Lunch for 2 company reps included.</li> <li>- Lunch for 6 invited guests (payment extra at \$40 each)</li> <li>- Your company name at reserved table</li> <li>- Recognition at the event and on program</li> </ul>	<ul style="list-style-type: none"> <li>- Your company notepad at each attendee seat and at check-in at seminar registration</li> <li>- Recognition on the program</li> <li>- You supply notepads</li> </ul>	<ul style="list-style-type: none"> <li>- Your company pen at each attendee seat and at check-in at registration</li> <li>- Recognition on the program</li> <li>- You supply pens</li> </ul>	<ul style="list-style-type: none"> <li>- Lunch incl. for one company representative</li> <li>- Skirted table to display your company information</li> <li>- Company mentions at event.</li> <li>- Recognition at the event and on program.</li> </ul>

Name: \_\_\_\_\_  
 Company: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Email: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Sponsorship Type Selection (include \$ amount) \_\_\_\_\_

*We would like to communicate with you about future events and seminars, Please indicate your consent to electronic*

Credit Card Payment Information     VISA     MASTERCARD     AMEX  
 CARDHOLDER NAME: \_\_\_\_\_  
 CREDIT CARD NUMBER: \_\_\_\_\_ CCV CODE \_\_\_\_\_  
 SIGNATURE: \_\_\_\_\_ EXPIRY \_\_\_\_\_  
 CAI MEMBER PRICE: \$ 40 \_\_\_\_\_ CAI NON-MEMBER PRICE: \$60 \_\_\_\_\_ (CHECK ONE)

Please email your registration form with payment information to [hello@caicanada.com](mailto:hello@caicanada.com) or call (647) 258-9554

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**CANADA'S ADVOCATE FOR RESPONSIBLE CONDOMINIUM COMMUNITIES**