

Cultivating Postvention and Survivorship

OCTOBER 13-15, 2025 Hilton Omaha 1001 Cass St., Omaha, NE 68102

SPONSORSHIP LEVEL	Founder	Visionary	Champion	Leader	Ambassador
	\$7,500	\$5,000	\$3,750	\$2,500	\$1,000
Registrations	12	10	8	4	3
Slide loop, website, social media tag	•	•	•	•	•
Logo print materials	•	•	•	•	•
Logo at registration	•	•	•	•	
Stage thank you	•	•	•	•	
Press release	•	•	•		
Logo on stage	•	•			
Individual social media post	•	•			
Relevant video shown during event or mic moment	•				

SELECT LEVEL HERE

A sponsor at any level may choose either of the following without additional limitation:

A branded item for 250 attendee swag bags

Please notify <u>Natalie Wallace</u> of the item you intend to include as soon as possible so she can ensure there are no duplicate item types. If another sponsor is already including that item, we will request a different one from you.



Reserved seating in general sessions

Seating is guaranteed for the number of registrants included in your sponsorship, but it may be increased to include additional representatives of your organization if needed. If reserved seating is selected, it is the expectation that this seating remains mostly full throughout the entirety of the conference.

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Add-on or standalone sponsor benefits

Sponsors may choose to either:

Add a benefit from the list below to your previously selected sponsorship package for a discounted price

Select a benefit from the list below for the standalone price

You may "own" one of the following areas with specific signage, be mentioned in the event app and website, and have the opportunity to customize the experience.

Welcome and photo opp

\$750 add-on to sponsorship package or \$1,500 standalone

Self-care room

\$1,250 add-on to sponsorship package or \$2,500 standalone

General session

\$1,750 add-on to sponsorship package or \$3,000 standalone

Reception

\$3,500 add-on to sponsorship package or \$5,000 standalone

Company Name:									
Contact Name:									
Contact Phone:		Contact Email:							
Amount: \$	Check Enclosed	Visa	Mastercard	AMEX	Discover				
Credit Card Number:	Expiratio	Expiration:			CSC:				
Billing Address:									
City:	State:	ZIP:							
Authorized Signature:									

Do you intend to use your conference registrations?

NO

If so, please provide the names of the attendees by September 29, 2025, to nwallace@thekimfoundation.org

**Unused registrations may be donated to individuals who could not attend otherwise.

Checks can also be mailed to:

The Kim Foundation - 11949 Q Street - Omaha, NE 68137

For additional conference information, contact:

Natalie Wallace, 402-891-6998, nwallace@thekimfoundation.org

