



SAFETY SAVES

● HEALTH + SAFETY CONFERENCE

📅 Thursday, November 21st, 2024
 🕒 8:30 am - 4:00 pm
 📍 Canad Inns Polo Park, Winnipeg

IPAM is offering a one day event for everyone who is working in or has an interest in Health & Safety.

For more information, contact the IPAM office at:
204-295-1512 or **office@ipam-manitoba.com**



SPONSORSHIP OPPORTUNITIES

<p style="text-align: center;">PACKAGE #1</p> <p style="text-align: center;">Platinum Sponsor - \$2,500</p> <ul style="list-style-type: none"> - Title Sponsor - 4 Event Registrations - Introduction of a speaker (your choice) - Logo prominently displayed on all promotional materials. - Information item at each seat. - Display Table (Optional) - Half or Full Page ad in on-site program. - Company logo on: <ul style="list-style-type: none"> ○ web site ○ PowerPoint ○ e-news blasts ○ social media mentions ○ on-site program ○ signage 	<p style="text-align: center;">PACKAGE #2</p> <p style="text-align: center;">Partner Sponsor - \$1,750</p> <ul style="list-style-type: none"> - 2 Event Registrations - Display Table (Optional) - Company logo on: <ul style="list-style-type: none"> ○ web site ○ PowerPoint ○ e-news blasts ○ social media mentions ○ on-site program ○ Signage
<p style="text-align: center;">PACKAGE #3</p> <p style="text-align: center;">Contributing Sponsor - \$1,250</p> <ul style="list-style-type: none"> - 1 Event Registration - Company name on: <ul style="list-style-type: none"> ○ web site ○ social media mentions ○ PowerPoint ○ on-site program ○ signage 	<p style="text-align: center;">PACKAGE #4</p> <p style="text-align: center;">Supporting Sponsor- \$750</p> <ul style="list-style-type: none"> - Company name on: <ul style="list-style-type: none"> ○ web site ○ PowerPoint ○ on-site program ○ signage



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SPONSORSHIP COMMITMENT FORM

CONTACT PERSON: _____

COMPANY: _____

ADDRESS: _____

CITY: _____ PROV: _____ POSTAL CODE: _____

TEL: () _____ EMAIL: _____

Please choose your level of commitment:

- PLATINUM - \$2,500
- PARTNER - \$1,750
- CONTRIBUTING - \$1,250
- SUPPORTING - \$ 750

GST is not applicable.

Send invoice to NAME: _____ EMAIL: _____

Please forward this form and your logo in both .eps and .jpg formats to office@ipam-manitoba.com

For more information, contact:

Lise Carbonneau

IPAM Manager

204-295-1512

office@ipam-manitoba.com and cc: whirlwind@shaw.ca