



**SPONSORSHIP
OPPORTUNITIES**

ANNUAL SPONSOR DESIGNATIONS



\$10,000 Includes:

- Associate Membership
- Website Sponsor Recognition (logo)
- Sponsor Recognition at all LAW Events
 - Includes Diamond Level Sponsor Benefits at the Annual Meeting
- Digital Ad on LAW Social Media*
- Week-Long Digital Ad on the LAW Website*
- Banner Ad on LAW Email(s)*
- Address LAW Board of Directors*
- Company Video Promotion at LAW Annual Meeting*



\$7,500 Includes:

- Associate Membership
- Website Sponsor Recognition (logo)
- Sponsor Recognition at all LAW Events
 - Includes Platinum Level Sponsor Benefits at the Annual Meeting
- Sponsor Recognition (logo) on LAW email(s)*
- Digital Ad on LAW Social Media*
- Week-Long Digital Ad on the LAW Website*



\$5,000 Includes:

- Associate Membership
- Website Sponsor Recognition (logo)
- Sponsor Recognition at all LAW Events
 - Includes Gold Level Sponsor Benefits at the Annual Meeting
- Sponsor Recognition (logo) on LAW email(s)*
- Digital Ad on LAW Social Media*
- Week-Long Digital Ad on the LAW Website*



\$2,500 Includes:

- Associate Membership
- Website Sponsor Recognition (logo)
- Sponsor Recognition at all LAW Events
 - Includes Silver Level Sponsor Benefits at the Annual Meeting
- Sponsor Recognition (logo) on LAW email(s)*



\$1,000 Includes:

- Associate Membership
- Website Sponsor Recognition (logo)
- Sponsor Recognition at all LAW Events
 - Includes Bronze Level Sponsor Benefits at the Annual Meeting
- Sponsor Recognition (logo) on LAW email(s)*

SPONSORSHIP REGISTRATION FORM

WE WANT TO SUPPORT LAW IN 2025!

Please confirm your commitment as a 2025 LAW Annual Sponsor by completing the form below and returning it to Marissa Coulon, LAW Account Manager.

CONTACT/BILLING INFORMATION:

Company

Company Contact

Contact Email

Address

Phone #

Website

☐

Gold Sponsor \$10,000

☐

Supporter Sponsor \$2,500

☐

Silver Sponsor \$7,500

☐

Friend of LAW \$1,000

☐

Bronze Sponsor \$5,000

Payment Information

Please select your preferred payment method and provide the necessary information:

☐ I will pay by credit card

Please complete the following:

Cardholder Name:

Card Number:

Expiration Date: _____ CVV: _____ Billing Zip Code: _____

Authorized Signature: _____ Date: _____

Your card will be charged upon processing. All information is securely handled.

☐ I will send a check

Make check payable to: Louisiana Association of Wholesalers



Louisiana Association of Wholesalers

Ph: (225) 767-7640 | E: marissa@amplouisiana.com |

W: www.louisianawholesalers.org