



BE
A PART
OF THE *cure*
WALK

A Walk to Honor
ALL Arkansas Cancer Patients

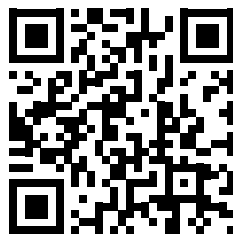
UAMS | Winthrop P. Rockefeller
Cancer Institute

*Proceeds support cancer research
at the Winthrop P. Rockefeller Cancer Institute.*

**SPONSORSHIP
OPPORTUNITIES + REGISTRATION**

UAMS[®]

Winthrop P. Rockefeller
Cancer Institute



BeAPartoftheCure.com

*Will follow Arkansas Department of Health COVID-19 Guidelines at all times.
In-person or virtual-only event to be determined by April 15, 2021.*



UAMS Winthrop P. Rockefeller Cancer Institute

SPONSORSHIP LEVELS

All sponsorships that accept registration will include T-shirt(s) and logo mask(s) with sponsorship package based on the number of registrations included with selected sponsorship level.



Diamond Sponsor \$10,000 Presenting Sponsor

- 10 registrations
- Verbal sponsorship recognition during event
- Sponsorship recognition with logo and name featured prominently on stadium jumbotron*
- Sponsorship recognition with logo and name in event media releases and advertisements
- Sponsorship recognition with logo and name in promotional materials, including invitations, event signage and on T-shirts
- Promotional table inside of stadium, if desired*
- Sponsorship recognition along walk route*
- Sponsorship recognition with name, logo and link to sponsor's website on Walk webpage
- Sponsor may add promotional materials to be included in each registration packet

Fair Market Value = \$250



Emerald Sponsor \$5,000

- 8 registrations
- Verbal sponsorship recognition during event
- Sponsorship recognition with logo and name featured on stadium jumbotron*
- Sponsorship recognition with logo and name in promotional materials, including invitations, event signage and on T-shirts
- Promotional table inside of stadium, if desired*
- Sponsorship recognition along walk route*
- Sponsorship recognition with name, logo and link to sponsor's website on Walk webpage
- Sponsor may add promotional materials to be included in each registration packet

Fair Market Value = \$200



Ruby Sponsor \$2,500

- 6 registrations
- Sponsorship recognition with logo and name in promotional materials, including invitations, event signage and on T-shirts
- Promotional table inside of stadium, if desired*
- Sponsorship recognition with name, logo and link to sponsor's website on Walk webpage
- Sponsor may add promotional materials to be included in each registration packet

Fair Market Value = \$150



Amber Sponsor \$1,000

- 5 registrations
- Promotional table inside of stadium, if desired*
- Sponsorship recognition on Walk webpage
- Sponsor may add promotional materials to be included in each registration packet

Fair Market Value = \$125



Amethyst Sponsor \$500

- 4 registrations
- Sponsorship recognition with name listed on Walk webpage

Fair Market Value = \$100



Sapphire Sponsor \$250

- 2 registrations
- Sponsorship recognition with name on Walk webpage

Fair Market Value = \$50



Rose Quartz Sponsor \$100

- 1 registration
- Sponsorship recognition with name on Walk webpage

Fair Market Value = \$25

Gift In Kind

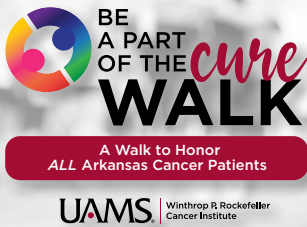
- Sponsorship recognition on Walk webpage

****If the Walk becomes a virtual-only event, sponsors will receive additional recognition on Walk webpage and all social media platforms pertaining to Winthrop P. Rockefeller Cancer Institute events.***



UAMS

Winthrop P. Rockefeller Cancer Institute



SPONSORSHIP REGISTRATION FORM

2021 Be a Part of the Cure Walk for Cancer
Saturday, May 1, 2021
8 a.m. - 1 p.m.

Please Print

Company Name: _____ Contact Name: _____

Address: _____ City, State: Zip: _____

Email: _____ Phone: _____

DIAMOND \$10,000

Presenting & Distinguished Sponsor
10 Registrations (10 T-Shirts & 10 Logo Masks)
Fair Market Value: \$250

Promotional table inside of stadium
 Yes or No

T-Shirts: Yes or No

Sizes and Quantity:
 XS _____ S _____ M _____ L _____
 XL _____ 2XL _____ 3XL _____

EMERALD \$5,000

Distinguished Sponsor
8 Registrations (8 T-Shirts & 8 Logo Masks)
Fair Market Value: \$200

Promotional table inside of stadium
 Yes or No

T-Shirts: Yes or No

Sizes and Quantity:
 XS _____ S _____ M _____ L _____
 XL _____ 2XL _____ 3XL _____

RUBY \$2,500

Distinguished Sponsor
6 Registrations
(6 T-Shirts & 6 Logo Masks)
Fair Market Value: \$150

Promotional table
inside of stadium
 Yes or No

T-Shirts: Yes or No

Sizes and Quantity:
 XS _____ S _____
 M _____ L _____ XL _____
 2XL _____ 3XL _____

AMBER \$1,000

5 Registrations
(5 T-Shirts & 5 Logo Masks)
Fair Market Value: \$125

Promotional table
inside of stadium
 Yes or No

T-Shirts: Yes or No

Sizes and Quantity:
 XS _____ S _____ M _____
 L _____ XL _____ 2XL _____
 3XL _____

AMETHYST \$500

4 Registrations
(4 T-Shirts & 4 Logo Masks)
Fair Market Value: \$100

T-Shirts: Yes or No

Sizes and Quantity:
 XS _____ S _____ M _____
 L _____ XL _____ 2XL _____
 3XL _____

SAPPHIRE \$250

2 Registrations
(2 T-Shirts & 2 Logo Masks)
Fair Market Value: \$50

T-Shirts: Yes or No

Sizes and Quantity:
 XS _____ S _____ M _____
 L _____ XL _____ 2XL _____
 3XL _____

ROSE QUARTZ \$100

1 Registration
(1 T-Shirt & 1 Logo Mask)
Fair Market Value: \$25

T-Shirts: Yes or No

Sizes and Quantity:
 XS _____ S _____ M _____
 L _____ XL _____ 2XL _____
 3XL _____

Additional Cash Donation \$ _____

Event advertising and marketing materials (including flyers and registration forms) to be promoted at my place of business.

Yes or No

A receipt for your sponsorship will be provided to you, less the amount of the fair market value of the good and services offered with each sponsorship. If you wish to decline the included registration(s), T-shirt(s) & logo mask(s), your recognition will be for the full amount of the sponsorship.

Yes, I decline the registration(s), T-shirt(s) & logo mask(s).

My gift is for the full amount of the sponsorship. _____ Initial

GIFT IN KIND: (A charitable tax receipt will not be issued for services, advertising, or items loaned for the event)

Description of in Kind Donation _____ Value \$ _____

Signature required on reverse side

WAIVER AND PHOTO RELEASE AGREEMENT

All participants registering or otherwise participating in the Be a Part of the Cure Walk for Cancer ("Event"), hereby expressly consent to the following:

I acknowledge and agree that participating in a walk/race may be a potentially hazardous activity. I agree to participate at my own risk, and I agree to assume all risks associated with participating in this Event, including, but not limited to, falls, weather conditions, traffic, road conditions, and contact with other participants.

I understand that bicycles, skateboards, roller skates, roller blades or riding any similar apparatus is not allowed during the Event. This exclusion does not include wheelchairs.

In consideration of my acceptance into this Event, I for my company, myself and anyone entitled to act on my behalf, hereby waive and release any and all claims, liabilities, damages (compensatory and punitive), legal fees, and causes of action that may arise as a result of my participating in the Event or any pre-Event/post-Event activities, that I may have or that I become aware of in the future, against persons, volunteers, and entities involved in planning, hosting or assisting with the Event, even if such liability may arise out of their negligence or carelessness, including but not limited to, the Event sponsors, the Board of Trustees of the University of Arkansas, the University of Arkansas for Medical Sciences, the University of Arkansas Foundation, Inc., and any of their trustees, directors, employees, members, representatives, successors and assigns.

I agree that this waiver and release applies to myself and my successors and assigns, heirs, and any executors, administrators, personal representatives or beneficiaries or others who may make a claim on behalf of my estate.

I grant full permission to use and reproduce my image or likeness by any audio and/or visual recording technique (including electronic/digital), for any legitimate purpose, including commercial marketing purposes, relating to the Event or to promote awareness and fundraising for cancer-related initiatives.

I understand and agree that any ticket price/entry fee(s) paid to participate in the Event are non-refundable.

I have read and agree with the statements above.

Signature Required: _____ **Date:** _____

Please enclose the completed form and make your check payable to **UAMS Foundation Fund**
Mailing Address: 4301 W. Markham St., #623G, Little Rock, AR 72205

Proceeds from the event benefit the Winthrop P. Rockefeller Cancer Institute at UAMS.

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