

HDHA



HISPANIC DENTAL ASSOCIATION

SPONSORSHIP/PARTNERSHIP PROSPECTUS



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New Rochelle, NY 10801



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Sponsorship Levels

La HADA Madrina/Padrino \$1,000 +

Donation to our Student Support Fund “La Hada Latina” to help cover individual student’s request by need. Past funds have been used to cover travel expenses to attend conferences, school supplies to support their education and other individual needs. Be recognized as La Hada Madrina/Padrino on HDA website

AMIGO SPONSOR \$5,000+ / yr

1. Website recognition, in a list of HDA “amigos”
2. Social Media Partnership Announcement: Shoutout on Instagram (exclusive)
3. Invitation to HDA programs/events

SILVER SPONSOR \$10,000+ / yr

1. Logo placement on the HDA’s website: the Sponsors page linked
2. Social Media Partnership Announcement
3. Acknowledgement in HDA event programs (digital) and quarterly e-newsletter
4. Two (2) complimentary registrations for a chosen HDA event or conference
5. Mention in HDA social media posts - 2 times a year
6. One (1) Professional Membership
7. Two (2) FREE e-blasts to over 7,000 members
8. Opportunity to provide a 5 min. introduction to company products/services during a chosen webinar

GOLD SPONSOR \$25,000+ / yr

1. All benefits from the Silver Level
2. Prominent logo placement on the HDA’s website homepage
3. Mention in HDA social media posts - 4 times a year
4. Two (2) complimentary registrations for annual meeting gala
5. Recognition as a Sponsor in press releases and media outreach
6. Half page ad placement in One (1) issue of the HDA Journal
7. Opportunity to provide a webinar (Learning goals mandatory for CE credits)
8. One (1) complimentary table at annual meeting including two (2) registrations

PLATINUM SPONSOR \$50,000+ / yr

1. All benefits from the Gold Level
2. Premier logo placement on all event materials and signage
3. One (1) complimentary gala table at annual meeting
4. VIP invitation and recognition to the HDA annual meeting
5. Exclusive Highlights on applicable social media (Instagram, Facebook)
6. Monthly eblast brand exposure reaching over 7,000 members
7. Full page ad placement in one (1) issue of the HDA Journal

LEGACY SPONSOR \$125,000+ / yr

The Strategic Partner and the HDA will become “thought partners” in the development of customized solutions that will help the leadership and add value to the professional development of both the HDA and the Strategic Partner

All the benefits from the Platinum Level, fully customized to the Sponsors preference:

1. Recognition as a Legacy partner of the HDA’s most vital programs
2. Customized marketing campaigns tailored to the sponsors goals
3. Mention in HDA social media posts - 12 times a year
4. Top tier visibility and acknowledgement at all HDA events
5. Official AV sponsor of the annual meeting

Sponsor/Partnership Contract

All Companies, Sponsors and Partners are offered additional opportunities to showcase their products and services through Annual HDA Sponsorships. The HDA is pleased to offer a variety of sponsorships at various levels of financial support. These opportunities are annual commitments to grow and develop relationships with all HDA Members and Professional Chapters. Take advantage of this opportunity to create visibility for your company with dental professionals serving the Hispanic Community

PLEASE INDICATE TABLE, SPONSORSHIP LEVEL OR OPPORTUNITY BELOW				AMOUNT
SPONSORSHIP LEVELS				
La Hada Madrina/Padrino	\$1,000			
Amigo Sponsor	\$5,000			
Silver Sponsor	\$10,000			
Gold Sponsor	\$25,000			
Platinum Sponsor	\$50,000			
Legacy Sponsor	\$125,000			
TOTAL				

PAYMENT METHOD (Please select the preferred method of payment)

Credit Card: Mastercard Visa American Express

Company Name: _____

Name (as it appears on credit card): _____

Card Number: _____ Exp. Date: _____ CSC: _____

Billing Address: _____

City: _____ State: _____ Zip code: _____

Check: (Payable to the **Hispanic Dental Association**)

Company Primary Contact: _____

Contact Phone: _____ Contact Email: _____

I agree that I have read, understand, and accept all terms of this agreement including full payment of all selected items and have read, understand, and accept all terms of the Contract Terms and Conditions.

Printed Name of Authorized Company Representative

Signature of Authorized Company Representative

Date