



ST. LOUIS AREA
CHAMBERS
**ECONOMIC
OUTLOOK
BREAKFAST**

THURSDAY, OCT. 22, 2024
8:00 – 9:30 a.m.
Renaissance St. Louis Airport Hotel

*Individual Ticket: \$35
includes breakfast*

SPONSORSHIP OPPORTUNITIES

MAJOR SPONSOR **\$2,500**

Banner with logo prominently displayed at the event (Company provided)

Recognition from podium

Four (4) tickets at prominent table

Logo on event signage

Recognition in printed and digital pre- and post-event communications

Industry exclusivity

REGIONAL SPONSOR **\$1,000**

Recognition from podium

Four (4) tickets at a prominent table

Logo on event signage

Recognition in printed and digital event communications

FRIENDS OF BUSINESS SPONSOR **\$250**

Two (2) tickets

Logo on event signage

Recognition in printed and digital event communications

DEVELOPMENT SPONSOR **\$500**

Three (3) tickets at a prominent table

Logo on event signage

Recognition in printed and digital event communications

All sponsorships come with two tickets to a VIP event on October 5, 2024.

SPONSORSHIP COMMITMENT FORM

Please RSVP with this form by Tuesday, October 1, 2024.



TUESDAY, OCTOBER 22, 2024 | 8 AM - 9:30 AM

I will provide **Sponsorship** to the 2024 St. Louis Area Chambers Economic Outlook Breakfast in the amount of: \$ _____

I will provide **Sponsorship** to the 2024 St. Louis Area Chambers Economic Outlook Breakfast in the amount of: \$ _____ but will be unable to attend the event.

Sponsorship Level: _____

Name/Organization: _____

Address: _____

Email Address: _____

Phone: _____

Name as it should appear on the program: _____

NAME OF GUESTS	
1.	<i>Individual: 1 Ticket</i>
2.	<i>Friends of Bus. Sponsor: 2 Tickets</i>
3.	<i>Development Sponsor: 3 Tickets</i>
4.	<i>Regional or Title Sponsor: 4 Tickets</i>

PAYMENT			
<i>If you have questions, comments, or directives regarding payment, please reach out to the contact below.</i>			
CREDIT CARD	<input type="checkbox"/> Visa	<input type="checkbox"/> MasterCard	<input type="checkbox"/> Discover <input type="checkbox"/> AmEx
CREDIT CARD #:			EXPIRATION:
NAME (As it appears on card:			CODE:

FULFILLMENT // My support can be expected on: ____/____/____



Chamber Contact

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