



FIRST WEDNESDAY

Art Walk

FIRST WEDNESDAYS | 5-9 P.M.
DOWNTOWN JACKSONVILLE



SPONSORSHIP LEVEL	ACTIVATION DELIVERABLES	MARKETING DELIVERABLES
\$100,000 SERIES SPONSOR Exclusive	Custom benefits based on series sponsor preferences	Custom benefits based on series sponsor preferences
\$10,000 TITLE SPONSOR “Presented By”	<ul style="list-style-type: none"> Booth Space Onsite signage Drink Tickets for a group of 50 people Live activation chosen by sponsor (ex.: live mural painting, live performance, photo booth) 	<ul style="list-style-type: none"> Dedicated Thank You Post Across Social Media Platforms (1) Modified event graphic to include sponsor logo “Presented by” verbiage and logo included on all online marketing materials (website, media alert, weekly newsletter, social media, etc.) Day of social media coverage tagging sponsor
\$8,000 EXPERT SPONSOR	<ul style="list-style-type: none"> Booth Space Onsite signage Drink tickets for a group of 10 people. Live activation (ex.: live mural painting, live performance, photo booth) 	<ul style="list-style-type: none"> Dedicated Thank You Post Across Social Media Platforms (1) Logo Featured on DTJax.com/ArtWalk Day of social media coverage tagging sponsor Mention in DTJax Weekly Newsletter
\$5,000 ADVANCED SPONSOR	<ul style="list-style-type: none"> Booth Space Onsite Signage Small scale activation 	<ul style="list-style-type: none"> Dedicated Thank You Post Across Social Media Platforms (1) Logo Featured on DTJax.com/ArtWalk Mention in DTJax Weekly Newsletter
\$3,000 EMERGING SPONSOR	<ul style="list-style-type: none"> Booth Space Onsite Signage 	<ul style="list-style-type: none"> Logo Featured on DTJax.com/ArtWalk



SPONSORSHIP LEVEL

- \$100,000 SERIES SPONSOR
- \$10,000 TITLE SPONSOR
- \$8,000 EXPERT SPONSOR
- \$5,000 ADVANCED SPONSOR
- \$3,000 EMERGING SPONSOR

Business Name _____

Contact Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Email: _____ Phone: _____

PAYMENT OPTIONS

_____ Invoice me

_____ Pay online at DTJax.com/Support

_____ Enclosed is my check for _____ made payable to DVA

_____ Please Charge \$ _____ to my:

_____ Visa _____ Master Card _____ American Express _____ Discover

Name on Card: _____ Billing Zip Code: _____

Card Number: _____ Exp. Date: _____ Security Code: _____

Authorized Signature: _____

Please email your high-resolution logo to Phoebe@DTJax.org

Email this form to Phoebe@DTJax.org
 or Mail to: Downtown Vision, Inc.
 Attention: Phoebe Mullis
 29 W. Duval St.,
 Jacksonville, FL 32202

DOWNTOWN VISION ALLIANCE IS A NON-PROFIT 501(C)3. FEIN 20-5078887. FLORIDA SOLICITATION NUMBER CH2477. COPY OF THE OFFICIAL REGISTRATION AND FINANCIAL INFORMATION MAY BE OBTAINED FROM THE DIVISION OF CONSUMER SERVICES BY CALLING TOLL-FREE WITHIN THE STATE. REGISTRATION DOES NOT IMPLY ENDORSEMENT, APPROVAL, OR RECOMMENDATION BY THE STATE.