

2024 IDAHO HAY & FORAGE CONFERENCE SPONSORSHIP PACKAGES

HOLIDAY INN & SUITES (S. FORK BLVD.) | IDAHO FALLS, ID | FEB. 29, 2024

\$5,000

PREMIER SPONSOR (EXCLUSIVE SPONSORSHIP: LIMIT ONE)

- 2 complimentary registrations at the Annual IHFA Conference
- 1 complimentary exhibit space at the Annual IHFA Conference
- Name/Logo* prominently displayed on Annual IHFA Conference materials, on IHFA website for one year, and on Annual IHFA Conference signage
- Full-page inside ad in the next IHFA Directory

\$3,000

PLATINUM SPONSOR

- 1 complimentary registration at the Annual IHFA Conference
- 1 complimentary exhibit space at the Annual IHFA Conference
- Name/Logo* displayed on all Annual IHFA Conference materials, on IHFA website for one year, and on Annual IHFA Conference signage
- Half-page inside ad in the next IHFA Directory (may apply toward upgrade)

\$2,000

INDUSTRY CONVENTION PROGRAM SPOTLIGHT

- 1 complimentary registration at the Annual IHFA Conference
- 1 complimentary exhibit space at the Annual IHFA Conference
- Name/Logo* displayed on all Annual IHFA Conference materials, on IHFA website for one year, and on Annual IHFA Conference signage
- Spotlight up to 15 minutes in the schedule to talk about your product or service

\$1,500

GOLD SPONSOR

- 2 complimentary luncheon tickets at the Annual IHFA Conference
- 50% off (1) exhibit space at the Annual IHFA Conference
- Name/Logo* displayed on Annual IHFA Conference materials and on Annual IHFA Conference signage

\$500

LUNCH SPONSOR

- 2 complimentary luncheon tickets
- Name/Logo* on luncheon signage

\$125

BREAK SPONSOR

- Name/Logo* on break signage

***IMPORTANT:** Must submit logo (.EPS, .PNG, .JPG, .PDF) by 2/16/24 to christine@amgidaho.com

PERSON COMPLETING FORM _____

COMPLIMENTARY REGISTRANT(S) (2 FOR PREMIER; 1 FOR PLATINUM - PLEASE FILL OUT AN EXHIBITOR FORM FOR COMPLIMENTARY EXHIBIT SPACE)

ORGANIZATION/COMPANY TO BE LISTED _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

PHONE _____ FAX _____ EMAIL _____

PLEASE BILL ME CHECK ENCLOSED CREDIT CARD (VISA, DISCOVER, MASTERCARD, & AMERICAN EXPRESS ACCEPTED)

CARD NO. _____

EXP. DATE _____ CVV _____

TOTAL AMOUNT \$ _____

PLEASE REMIT TO:

IHFA | 55 SW 5th Ave, Ste 100 | Meridian, ID 83642
E: christine@amgidaho.com | FX: 208-888-4586

OFFICE USE

Date _____
Ck # _____
Amount \$ _____
 GL Mem