Announcing the Sixth Annual
Southeastern Collegiate Recovery Community Summit
May 16, 17 and 18, 2018
Hosted By

You are invited to exhibit for a nominal fee (see levels of sponsorship on attached sheet). This money goes to fund scholarships for the students enrolled in our host school’s CRC Program. Many of us have had the very good fortune of treating the young adult population, and this gives us an opportunity to do our “service work” and to “pay back” by supporting these students.

Please let me encourage you to participate so we can demonstrate our support to recovering students and our support of the Southeastern CRC Summit.

Complete the attached form and return with your check by April 1, 2018 to:
Lee Hyaduck
Kennesaw State University
Center for Young Adult Addiction and Recovery
1085 Canton PI, NW, University Village 6139A, MD 6002
Kennesaw, GA 30144
470-578-7849
PLEASE MEMO ALL CHECKS TO #31 SCHOLARSHIP
Or register on line at:
https://epay.kennesaw.edu/C20923_ustores/web/classic/store_main.jsp?STOREID=119

For further information please contact:
Eileene McRae
eileene_mcrae@cumberlandheights.org
601-467-1966 or 601-520-9423
SE Collegiate Recovery Community Summit
Sponsorship Opportunities
May 16, 17, and 18, 2018
Kennesaw State University
Kennesaw, GA

**Event Patron: 5,000**
- Exhibit table
- One chair
- Participation in all Summit meals and professional presentations
- Name and logo on signage throughout exhibit hall
- Recognition during Summit from the podium
- Name & logo in e-communications and social media*
- 1/2-page ad in Program
- Premier signage with sponsor's logo at event
- On screen logo recognition during event
- A seat at the post SE CRC SUMMIT BOARD MEETING at the ARHE July 2018 conference

**Food/Activity Sponsor: $1,500**
- Exhibit table
- One chair
- Participation in all Summit meals and professional presentations
- Name and logo on signage throughout exhibit hall
- Recognition during Summit from the podium
- Name & logo in e-communications and social media*

**Exhibitor: $750**
- Exhibit table
- One chair
- Participation in all Summit meals and professional presentations
- Name on signage throughout exhibit hall

Name of Agency:

Contact/Exhibitor: _____________________________________________________________
Cell Number: _________________________________________________________________
Address: ____________________________________________________________________

Credit Card information: Name:____________________________ Authorization code: _______
Number: _____________________________________________ Exp: __________________

All payments should be made out to:
KSU Foundation – Center for Young Adult Addiction Recovery
Memo line- #31 Scholarship