

Partnership Package

POWERED BY **(\$15,000)**

Brand Exposure:

- Company logo listed as a **"Powered By"** partner on Chicostart & growTECH website homepage
- Company logo listed as a **"Powered By"** partner on CS & GT communications and events
- Chicostart Mentorship
- Opportunity to lead an industry event/workshop
- Access to CS & GT e-communications and social posts to members + the region
- Access to CS & GT events and resources
- growTECH Mega Membership
- growTECH FEST **"Powered By"** Sponsor

GROW **(\$7,500)**

Brand Exposure:

- Company logo listed as a **"Grow"** partner on Chicostart & growTECH website + communications and events
- Chicostart Mentorship
- Opportunity to lead an industry event/workshop
- Access to CS & GT e-communications and social posts to members + the region
- Access to CS & GT events and resources
- growTECH Macro Membership
- growTECH FEST **"STARTUP"** Sponsor

THRIVE **(\$10,000)**

Brand Exposure:

- Company logo listed as a **"Thrive"** partner on Chicostart & growTECH website + communications and events
- Chicostart Mentorship
- Opportunity to lead an industry event/workshop
- Access to CS & GT e-communications & social posts to members + the region
- Access to Chicostart & growTECH resources
- growTECH Mega Membership
- growTECH FEST **"VISIONARY"** Sponsor

START **(\$2,500)**

Brand Exposure:

- Company logo listed as a **"Start"** partner on Chicostart & growTECH website + communications and events
- Chicostart Mentorship
- Access to CS & GT events and resources
- growTECH Micro Membership
- GrowTECH FEST **"MVP"** Sponsor

Partnership Agreement

Date: _____

Partnership Package:

POWERED BY
(\$15,000)

GROW
(\$7,500)

THRIVE
(\$10,000)

START
(\$2,500)

ONE TIME DONATION

\$ Amount _____

Name: _____

Last Name: _____

Address: _____

Phone: _____

Email: _____

Business Name: _____

Business Website: _____

PAYMENT METHOD: Annually ____ Bi-Annually ____ Quarterly ____

Card Type: Master Card VISA Check/ACH

Cardholder Name (as shown on card): _____

Card Number: _____

Expiration Date (mm/yy): _____ Cardholder ZIP Code: _____

I, _____, authorize _____
to charge my credit card above for agree upon purchases.

Partner Signature: _____

Approved by Chicostart Representative: _____