



**The 10th Annual American Indian Health Research and Education Alliance (AIHREA)
Health and Wellness Pow Wow**

Saturday, May 7th, 2016 10:00am – 10:00pm
 Sunday, May 8th, 2016 10:00am – 5:00pm
 Johnson County Community College, Overland Park, Kansas

Health Sponsor Application

Organization Name: _____

Nation/Tribal Affiliation (if applicable): _____

Contact Name: _____

Address: _____

Telephone: _____ E-mail: _____

Sponsorship Types

One Health Screening: \$1,500

- | | | | |
|----------------------------|--------------------------|------------------------|-----------------------|
| ___ Blood Cholesterol | ___ Blood Glucose | ___ Blood HbA1C | ___ Blood Pressure |
| ___ Body Mass Index | ___ Breast Cancer | ___ Cervical Cancer | ___ Colorectal Cancer |
| ___ Depression and Anxiety | ___ Diabetic Foot Checks | ___ Heart Disease Risk | ___ Lung Function |
| ___ Nutritional Counseling | ___ Prostate Cancer | ___ Suicide Prevention | ___ Vision |

What do you get?

- *Signage over the screening*
- *Recognition from the MC throughout the event*
- *1/4 page recognition in the program*
- *Recognition on our website, in our newsletter, and on our listserv*

Groups of Health Screenings

- | | |
|--|----------------|
| ___ Cancer Risk: Breast Cancer, Cervical Cancer, Colorectal Cancer, and Prostate Cancer | \$5,000 |
| ___ Diabetes: Blood Glucose, Blood HbA1C, Diabetic Foot Checks | \$4,000 |
| ___ Heart Disease: Blood Cholesterol, Blood Pressure, Body Mass Index, Heart Disease Risk, Nutritional Counseling | \$6,000 |
| ___ Mental Health: Depression and Anxiety, Suicide Prevention | \$2,500 |

What do you get?

- *Signage over each screening and a larger sign over the group*
- *Recognition from the MC throughout the event*
- *1/2 page recognition in the program*
- *Recognition on our website, in our newsletter, and on our listserv*

Sponsor Registration: \$5,000

What do you get?

- Signage over the registration table (first table, head table for the event, all participants must go to this table)
- Recognition from the MC throughout the event
- ½ page recognition in the program
- Recognition on our website, in our newsletter, and on our listserv

Sponsor Ask a Doc: \$5,000

What do you get?

- Signage over Ask a Doc table (final table, all participants must go to this table)
- Recognition from the MC throughout the event
- ½ page recognition in the program
- Recognition on our website, in our newsletter, and on our listserv

Sponsor the Entire Screening Clinic: \$20,000

What do you get?

- Acknowledgement on event advertisements
- Signage over the entire clinic
- Recognition from the MC throughout the event
- 1 page recognition in the program
- Recognition on our website, in our newsletter, and on our listserv
- Highlight in our annual report

Please indicate your sponsorship commitment:

_____ ***One Health Screening (check the appropriate screening above, \$1,500 per screening)***

_____ ***Group of Health Screenings (check the appropriate group above, amount varies)***

_____ ***Registration (\$5,000)***

_____ ***Ask a Doc (\$5,000)***

_____ ***Entire Screening Clinic (\$20,000)***

Please make checks payable to the American Indian Health Research and Education Alliance, Inc.

Please return the completed application via postal mail by Friday, April 8th to:

Christine Daley, PhD, MA, SM
American Indian Health Research & Education Alliance, Inc.
6819 Woodstock Court
Shawnee KS 66218

-or-

Coreen Gunja
Center for American Indian Community Health, University of Kansas Medical Center
MS #1030, 3901 Rainbow Blvd.
Kansas City, Kansas 66160

For more information, please contact Coreen Gunja at 913-588-0866 or cgunja@kumc.edu.