



SPONSORSHIP OPTIONS 2025

As a sponsor, you ensure that the Ohio Association for Healthcare Philanthropy (OAHP) membership not only learns about the latest products, programs, and trends from your perspective, but you also assist in bringing top level conferences, lunch and learns, webinars and networking opportunities to the membership. The OAHP produces one of the most respected philanthropy conferences in Ohio. Conference presenters share best practices, new ideas and point attendees to new directions in the field. Our conference provides healthcare fundraisers with excellent educational programming close to home, providing an ideal place to showcase your company to existing and potential customers. We appreciate you!

PARTNER BENEFITS	\$3,000	\$1,500	\$750
Featured sponsor of all our educational events including logo on literature, event signage, and invitations.	✓		
One exhibitor table prominently located for all in-person sessions. The ability to introduce yourself and share information at some point during an in-person event.	✓		
List of attendees to be used for post-conference marketing communication	✓		
Title sponsor for one webinar	✓	✓	
Featured sponsor of a specific element (lunch, dessert or another creative idea). - including an exhibitor table		✓	
Attendance at all programs offered and personal membership to the OAHP	10 attendees In total that can be used among as many events as held	4 attendees In total that can be used among as many events as held	2 attendees to be used at one event
Prominent logo placement on promotional materials and OAHP website. Corporate membership to the OAHP	✓	✓	✓

OAHP Current Schedule

Webinar
Fall Conference
Webinar

DATE

August (TBD)
October 9, 2025
November (TBD)

TIME

noon
full day
noon

LOCATION

Virtual
Dayton Children's Hospital
Virtual

Other options may exist depending on location, please reach out to OAHP if you want to explore something unique.



OAHP SPONSORSHIP FORM

TOTAL AMOUNT: \$ _____ .00

Details needed:

How will you use your attendees:

at _____ August Webinar

at _____ November Webinar

at _____ Fall conference

SEND your logo in .jpeg format prior to our first webinar or before April 1 to be included in placement.

Do you prefer to be the host of the Coffee Bar _____ or Dessert Station _____ (for our \$1,500) donors.

SPONSOR INFORMATION

Company Name (Printed as you wish it to appear)

Contact Name / Title

E-mail Address

Billing Address

City, State, Zip

Telephone

Fax

PAYMENT OPTIONS

Amount: \$ _____

_____ Check enclosed _____ Please bill me _____ Other _____

PLEASE MAKE CHECK PAYABLE TO:

OAHP

7517 WIND RIVER DRIVE

SYLVANIA, OH 43560

OR to pay by Credit Card, please call Abbey @ 419-764-4387