



## Sponsorship Confirmation Form

*Yes! We would be proud to support the 2025 Utah Peer Conference.*

We authorize LBHS to include our name and/or logo as provided on all the materials printed for the event consistent with our sponsorship selection below.

Company name:

Contact name:

Address:

City:

State:

Zip:

Office Phone:

Cell Phone:

Email address:

Website:

**To ensure your name/logo is included in all printed materials, return form by May 15, 2025.**

Check enclosed (please make payable to Latino Behavioral Health Services)

Credit/ debit card payments accepted over the phone at (801) 935-4447 (ask for Cris Godoy)

Please send an invoice

We will not be using our included exhibit space.

Sponsorship Opportunity Selection:

Partner

Collaborator

Supporter

Ally

Nonprofit

Other

Please forward logo or any questions to [javier.alegre@latinobehavioral.org](mailto:javier.alegre@latinobehavioral.org).

Please write "Utah Peer Conference" in the subject line.

PLEASE MAIL SPONSORSHIP CHECKS TO:

Latino Behavioral Health Services  
Memo: Utah Peer Conference Sponsorship  
3269 South Main Street, Suite 100  
South Lake City, UT 84115.

For your records, Latino Behavioral Health Services Exempt Tax ID# is 46-5038499.

