



STAND UP FOR INNOCENCE

LAUGH OUT LOUD AT AN EVENING OF STANDUP COMEDY TO
SUPPORT THE INNOCENCE PROJECT OF FLORIDA'S WORK TO FIND
AND FREE THE WRONGFULLY CONVICTED IN FLORIDA'S PRISONS.

SPONSORSHIPS & TICKETS ON SALE NOW AT
FLORIDAINNOCENCE.ORG/STANDUPPALMBEACH

PALM BEACH

KEISER UNIVERSITY
2600 N. MILITARY TRAIL
WEST PALM BEACH, FL 33409

JANUARY 31, 2025

RECEPTION AT 7 PM
SHOW AT 8:15 PM



STAND UP FOR INNOCENCE

Laugh out loud at an evening of standup comedy while supporting the Innocence Project of Florida's work to find and free the wrongfully convicted in Florida's prisons.

JANUARY 31, 2025

Keiser University
2600 N. Military Trail,
West Palm Beach, FL 33409



SPONSORSHIP OPPORTUNITIES

SPONSORSHIP BENEFITS	\$2,500	\$1,000
Pre-Event Recognition		
Website Recognition*	✓	✓
Printed Materials Recognition*	✓	✓
Social Media Recognition**	✓	✓
On-Site Event Recognition		
Advertisement in program	Full Page	Quarter Page
Logo Displayed on Sponsor Board	✓	✓
Reserved Seating	Premiere	Preferred
Complimentary Show Tickets	10 tickets	4 tickets
Complimentary Reception Tickets	10 tickets	4 tickets

Please select a sponsorship level and complete a sponsorship commitment form either online at <https://shorturl.at/QacO1> or via the attached PDF Form by January 19, 2025.

If you would like to discuss an alternative level of support or in-kind donation, please contact Juliana Hemela, IPF Development Specialist, at 850.583.2893 or by email at jhemela@floridainnocence.org

*Logo and Name included on our website 1 year from date of event.

**Logo and Name included on our social media and email promotions for period leading up to event



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January 31, 2025
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SPONSORSHIP COMMITMENT FORM

Yes, I would like to sponsor the Innocence Project of Florida's 2025 Stand Up for Innocence Comedy Show at the following level:

- \$2,500 Innocence Advocate
- \$1,000 Innocence Friend

SPONSORSHIP CONTACT INFORMATION

Sponsorship Contact Person: _____

Organization or Company: _____

How you or company would like name displayed at Event, and on Digital and Printed Materials:

Address: _____

City: _____ State: _____ Zip: _____

Day Phone(s): _____

Email(s): _____

Do you plan on using your tickets?: _____

PAYMENT INFORMATION

- Check payable to the Innocence Project of Florida is enclosed.
- Sponsorship Purchased online at <https://shorturl.at/QacO1>
- Please send me an invoice, and I will remit payment.
- Please charge my (circle option): AMEX VISA MASTERCARD DISCOVER

Card Number: _____ Expiration Date: _____

Name on Card: _____ Security Code: _____

Billing Address for Card (please select a box):

- Same as above
- New Address: _____
- City: _____ State: _____ Zip: _____