



WORKPLACE INCLUSION NETWORK

A PROGRAM OF THE VIRGINIA CENTER FOR INCLUSIVE COMMUNITIES

2024 REGISTRATION FORM

STEP 1: PROVIDE YOUR CONTACT INFORMATION

Name of Participating Organization: _____

Designated Point of Contact: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Daytime Phone: (_____) _____ Email: _____

Session #3 Preferred Location: [] 6/26/24 | RICHMOND or [] 7/10/24 | HAMPTON ROADS

STEP 2: CHOOSE YOUR MEMBERSHIP LEVEL

[] WIN CHAMPION - \$7,500

WIN Program Opportunities:

- Your company is able to send up to 10 employees to each WIN program + up to 5 employees to Virginia Inclusion Summit
- Your company's logo displayed on sponsor sign at in-person WIN program
- Your company's name highlighted in WIN 2024 social media posts
- Your company receives a customized 2-hour VCIC workshop for WIN participants
- Your company is listed on VCIC's website (with link)

[] WIN LEADER - \$3,500

WIN Program Opportunities:

- Your company is able to send up to 5 employees to each WIN program + up to 2 employees to Virginia Inclusion Summit
- Your company's name displayed on sponsor sign at in-person WIN program
- Your company is listed on VCIC's website (with link)

[] WIN SUPPORTER - \$1,250

- Your company is able to send up to 2 employees to each WIN program + 1 employee to Virginia Inclusion Summit
- Your company is listed on VCIC's website (with link)

[] WIN NON-PROFIT - \$750

- Your company is able to send up to 2 employees to each WIN program + 1 employee to Virginia Inclusion Summit
- Your company is listed on VCIC's website (with link)

STEP 3: SELECT YOUR PAYMENT OPTION

_____ Check enclosed payable to "VCIC" for \$_____

_____ Check being mailed separately

_____ Please send an invoice to address indicated

Virginia Center for Inclusive Communities

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