



# SPONSORSHIP REGISTRATION FORM

Join key executives from around the world as they gather together to discover ways to better their business at the 2017 NMEDA Annual Conference. This is NMEDA's biggest event of the year and there are a number of opportunities for you to promote your company's message to key decision makers in the industry.

**Deadline in order to receive promotional acknowledgement: December 23, 2016**

Sponsorship is an overt display of leadership to our industry. It gives your company marketing power and valuable exposure with positive reinforcement of your company's involvement and support of NMEDA. The NMEDA Sponsorship Program provides specific value added exposure to the mobility equipment industry. Each opportunity is designed to ensure high visibility and company brand awareness.

### Sponsorship Benefits:

- Meal sponsors will have 20 minutes to address the group at the sponsored function.
- Recognition in program guide, distributed to ALL attendees.
- Signage at the sponsored event and at the exhibit hall entrance.
- Recognition at a general session.
- Name listed on NMEDA website, w/ link to sponsor's website.

**NOTE:** Partial sponsorship opportunities are available on some levels by paying a portion of the sponsorship fee.

Review the list to the side and check all sponsorships that are of interest to you. Then complete the bottom portion of this form and mail or fax it to NMEDA. For more information - or to check availability - call Marilyn at (800) 833-0427 or email [nmedamk@aol.com](mailto:nmedamk@aol.com).

Food/Beverage:		
___	Reception Tuesday	\$6,000
___	Breakfast Wednesday	\$9,000
___	Breakfast Thursday	\$9,000
___	Break Wednesday AM	\$2,400
___	Break Wednesday PM	\$2,400
___	Break Thursday AM	\$2,400
___	Break Thursday PM	\$2,400
___	Lunch Wednesday	\$10,000
___	Lunch Thursday	\$10,000
Thursday Banquet:		
___	Wine	\$5,000
___	Entertainment	\$1,000
Promotional Materials:		
___	4-color Program Book Ad	\$1,200
___	Keynote Speaker	\$5,000

**Requests submitted after December 23, 2016 cannot be guaranteed promotional acknowledgement.**

ALSO: Please submit a full-color, high resolution (150-300dpi) file (.jpeg, .tiff or .eps) of your company logo to [webmaster@nmeda.org](mailto:webmaster@nmeda.org) by the deadline above.

Card Total: _____	Card Type: VISA: _____	M/C: _____	AMEX: _____
Card #: _____	V-Code: _____	Exp. Date: _____	
Company and/or Name on Card: _____ / _____			
Billing Address: _____			
Authorizing Signature: _____			