

Promotional Partnership Application

Deadline: May 15, 2009

ORGANIZATION PROFILE

Company, Institution or Organization. Please print the name of Company, Institution or Organization exactly as it should appear in print materials.

Description. Please provide a description of your Company, Institution or Organization. Please print exactly what you wish to see appear in the Conference Book and other related materials.

(75 words maximum)

CONTACT

Please note the main contact to whom all communication should be sent.

First Name

Last Name

Title

Address

Street

City

State

Zip

Phone

Fax

Email

MEMBERSHIP INFORMATION

Please check the organization(s) below to which you, or your organization, are a member.

Please check all that apply.

- American Association for Health Educators
- National Association of Health Education Centers
- EDA - Eastern District Association of American Alliance for Health, Physical Education, Recreation and Dance
- PSAHPERD

Please direct questions to 414-390-2187 or via email to nahec@nahec.org.

SPONSORSHIP OPPORTUNITIES

Platinum Level

Conference Sponsor \$20,000

Gold Level

Conference Meal Sponsor \$10,000

Special Event Sponsor \$ 7,000

Silver Level

Welcome Events Sponsor \$ 5,000

Luncheon Sponsor \$ 5,000

Bronze Level

Welcome Reception Sponsor \$ 3,000

Welcome Breakfast Sponsor \$ 3,000

Round Table Luncheon Sponsor \$ 3,000

Closing Plenary Luncheon Sponsor \$ 3,000

Friend Level

Tote Bag Sponsor \$ 2,000

Conference Breaks Sponsor \$ 2,000

SPONSORSHIP SUBTOTAL \$

EXHIBITOR OPPORTUNITIES

Exhibitor Package \$ 1,000

Exhibit Space

Please note the cost based on the booth type, quantity of booths and member status.

	<u>Member</u>	<u>Non-Member</u>
Early Bird Fees	\$450	\$600
Advance Fees	\$550	\$700

EXHIBITOR SUBTOTAL \$

SUPPORTER OPPORTUNITIES

Commercial Presentation

	<u>Member</u>	<u>Non-Member</u>
Early Bird Fees	\$150	\$200
Advance Fees	\$200	\$250

Conference Guide Advertising

Agency or cash discounts are not available. Original artwork should be submitted in EPS format to NAHEC by **May 1, 2009**.

	<u>Member</u>	<u>Non-Member</u>
Back Cover (7" x 10")	\$425	\$525
Inside Back Cover/ Inside Front Cover (7" x 10")	\$350	\$450
Interior – Full Page (7" x 10")	\$200	\$300
Half Page (7" x 4 1/8")	\$150	\$240

Tote Bag Insert/ Literature Display

	<u>Member</u>	<u>Non-Member</u>
Tote Bag/Lit Display	\$100	\$150

SUPPORTER SUBTOTAL \$

TOTAL \$

REGISTRANT INFORMATION

Two conference registrations are included in the sponsorship and exhibitor packages. Please list the names of those who you wish to register as part of your promotional package. *Note, the Supporter Partner category does NOT include registrations.*

REGISTRANT 1

First Name _____ Last Name _____
Title _____
Organization Name _____
Street _____
City _____ State _____ Zip _____
Phone _____ Fax _____
Email _____

REGISTRANT 2

First Name _____ Last Name _____
Title _____
Organization Name _____
Street _____
City _____ State _____ Zip _____
Phone _____ Fax _____
Email _____

PAYMENT

Please complete the payment information below. Payment must accompany registration form.

Check Please make checks payable to NAHEC.
There will be a \$25 charge for returned checks.

Credit Card Visa MC

Card Number: _____ Exp. Date: _____

Cardholder Name: _____

Billing Address: _____

City: _____ State/Province: _____ Postal Code: _____

AGREED AND ACCEPTED

By signing this form I confirm that this information is correct to the best of my knowledge. I fully understand my responsibilities if this proposal should be accepted and agree to all terms.

Signature _____ Date _____

Thank you for your interest in promoting at our upcoming conference. Forms may be submitted: **By mail** Engage. Challenge. Inspire. 2009 Conference Coordinator, 1533 N RiverCenter Drive, Milwaukee, WI 53212, **By fax** 414.390.2199 or **Electronically** Choose Submit Button

Please direct questions to nahec@nahec.org or 414.390.2187.