\$ 4,000



COL	NITA	CT	INII		DA/	ATI	
CUI	NIA	C I		ГU	RIVI	АП	UN

Company Name	
Mailing Address	
City, State, Zip	
Contact Name	
Contact Phone	
Contact Fmail Address*	

SPONSORSHIP LEVEL

Gold	\$25,000	Silver	\$20,000
Bronze	\$10,000	Copper	\$5,000

ADDITIONAL OPPORTUNITIES

DETITIONAL OF FORTHUR		onane registration banner a Emait	φ 4,000
President's Happy Hour	\$ 30,000	NY24 Countdown Clock	\$ 3,500
Conference Wi-Fi	\$ 17,500	Restroom Mirror Clings	\$ 3,500
Onsite Registration	\$ 12,500	Water Bottles & Filling Stations	\$ 3,500
Thursday Coding Seminar Lunch Symposium	\$ 10,000	Directional Floor Decals	\$ 3,000
Lunch Symposium (+ Actual F&B) Non CECH	\$ 7,500	Conference Lanyards (sponsor produce	d) \$ 3,000
Conference Bags (sponsor produced)	\$ 6,000	Post-Conference Thank You/Survey	\$ 2,500
Daily Break Stations	\$ 5,000	Conference Bag Inclusion	\$ 1,000
Friday Saturday Sunday		Pre-Conference Attendee List	\$ 400
		Attendee Educational Workshop	Unrestricted Grant

Online Registration Banner & Email

PAYMENT INFORMATION

Payment is due in full by **Thursday, November 2, 2023**.

Payment is due in full for all applications received after **Thursday, November 2, 2023**.

NYSPMA and/or Foundation for Podiatric Medicine will charge the remaining balance to the credit card below on **Thursday, November 2, 2023**.

A 50% deposit must accompany this form to reserve sponsorship.

Payment Method:

Signature_

Mast	erCard	Visa	American Express	
Chec	k Payable to	Foundation	on for Podiatric Med	licine
Payme	nt Amount			
Card H	older's Name	<u> </u>		
Card N	umber			
Exp. Da	te	Securit	y Code	Card Holder's Zip Code

Email applications to dani@nyspma.org

Fax applications to 646-365-7426

Mail applications to 330 West 38th Street Suite 1105 New York, NY 10018



NY24 EXHIBIT HALL HOURS

- Friday, January 19, 2024
- Saturday, January 20, 2024
- Sunday, January 21, 2024

9:30am - 5:30pm 9:30am - 5:30pm

9:30am - 1:00pm



^{*}All conference communication will take place via email