**NV Statewide Maternal and Child Health Coalition**

**Fall Symposium**

**Sponsorship & Exhibiting Opportunities**

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| * **LEVEL OF SUPPORT**
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| [ ]  *Maternal and Child Health* Presenting Sponsor $4,000\** Ad in program (full page with logo)
* 10-15 presentation time
* Sponsor table (limited amount of tables)
* Recognition on website
* Recognition on social media
* Recognition on print materials
* Organization name included in Save the Date e-blasts
 |
| [ ]  *Healthy Children* Supporting Sponsor $2,000\** Ad in program (half page)
* Sponsor table (limited amount of tables)
* Recognition on website
* Recognition on social media
* Recognition on print materials

[ ]  *Healthy Families* Sponsor $1,000* Sponsor table
* Recognition on website
* Recognition on print materials
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| [ ]  Education Partner Supporter $500\** Shared Sponsor table
* Recognition in program book
* \*subject to change

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| * **SUPPORTER INFORMATION**
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| Company/Organization: |  |
| Contact Person: |  |
| Phone: |  |
| Email: |  |
| Mailing address: |  |
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| * **PAYMENT METHOD**
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| [ ]  Credit Card |  |
| Name on Card: |  |
| Credit Card Number: |  |
| Expiration Date: |  Verification code: |
| Billing Address: |  |
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For additional questions regarding exhibitor and sponsor information, please contact Jackie Kennedy at 702-492-8595 or email **Jacqueline.Kennedy@dignityhealth.org**

**THANK YOU!**