



73rd Annual Conference and Business Meeting
AGREEMENT FOR SPONSORSHIP/EXHIBITOR SPACE
September 22 – 24, 2010
Tax ID 64-063978-8

- | | |
|---|---|
| <input type="checkbox"/> <u><i>Gold Level Sponsor - \$2,500</i></u> | <input type="checkbox"/> <u><i>Exhibitor Only - \$450</i></u> |
| <input type="checkbox"/> <u><i>Silver Level Sponsor - \$1,500</i></u> | <input type="checkbox"/> <u><i>Break Sponsor - \$450</i></u> |
| <input type="checkbox"/> <u><i>Bronze Level Sponsor - \$750</i></u> | <input type="checkbox"/> <u><i>Program Advertising – Full Page - \$300</i></u> |
| <input type="checkbox"/> <u><i>Exhibitor plus Break Sponsor - \$750</i></u> | <input type="checkbox"/> <u><i>Program Advertising – Half Page - \$200</i></u> |
| | <input type="checkbox"/> <u><i>Program Advertising – Quarter Page - \$100</i></u> |

Amount enclosed _____

Checks are to be made payable to the Mississippi Public Health Association.

Please print or type all information

Brief description of service or commodity your company provides:

Please complete the following and promptly return:

Firm _____ Date _____

Mailing Address _____

City _____ State _____ Zip _____

Name _____ Title _____

Signature _____

Email: _____ Phone _____

Please list exhibitor representatives (Please type or print – for name tags):

1. _____

2. _____

Electrical outlet needed: yes no

Deadline for reservations of booth space is September 2, 2010. Registrations are not considered complete until application and check are received. Return application with check to:

Mississippi Public Health Association
P.O. Box 4834
Jackson, Mississippi 39296-4834
Attn: MPHA Sponsor/Exhibits Chairperson/Sandra Mangum
Fax: 601-956-5262