

Application for Sponsor/Exhibit

Company Name (as you wish it to appear in program)

Direct Correspondence to Address

City State/Province Zip Country

Telephone Fax Email

SPONSOR/EXHIBITOR LEVEL

Diamond @ \$120,000 US \$

Gold @ \$60,000 US \$

Silver @ \$20,000 US \$

Bronze @ \$2,500 US \$

Total US \$

NOTE: Sponsor levels determined by total support for ICNA-CNS Meeting.

Example 1: Sponsor paying for Industry-Sponsored CME Session (\$50,000) and two-page ad spread in *CNS Connections* (\$10,000) would qualify for Gold Level sponsorship.

Example 2: Sponsor wishing to identify as Diamond Sponsor might give general or unrestricted educational grant of \$100,000 and place 4-page ad spread in *CNS Connections* (\$20,000).

SPONSOR/EXHIBITOR PAYMENT

(payment must accompany application form)

Checks payable to Child Neurology Society (US \$ only)

Check No.

VISA MasterCard American Express

Card No.

Exp.

Name as it appears on card

Authorized Signature

Please fill out, sign, scan and email as pdf to: Sue Hussman, CMP, CMM | CNS, 1000 West County Rd E, Suite 290, St. Paul, MN 55126
QUESTIONS: Contact Sue | schussman@childneurologysociety.org | (651) 486-1262

TO REGISTER SALES REPS AND RECEIVE BADGES:

Once payment is received, you will be contacted by Sue Hussman with further information/instructions on how to upload your collateral to the virtual meeting platform and register sales representatives.

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CNS Tax ID: 23-7359775