



SPONSORSHIP APPLICATION

INSTRUCTIONS: Type or print this application. Complete all sections. Should you need a copy, make a copy for your files. Sign and return this original application with full payment payable to the Microscopy Society of America, P.O. Box 485, LaGrange, IL 60525-0485. Credit card payments must be made online via [our secure payment website](#). Fax your signed application to 312-541-0573 or email to Catalina@CorcExpo.com. Upon receipt of application and full payment, Sponsorship Management will send confirmation.

OPPORTUNITIES: Sponsorships are assigned on a first-come, first-served basis. For more information, please contact Matt McLaughlin at 312-541-0567 or Matt@CorcExpo.com. Please select sponsorship preference:

- | | | | | | |
|---|-----------|---|----------|--|----------|
| <input type="checkbox"/> Meeting Bag | \$ 16,000 | <input type="checkbox"/> Recycle Bins | \$ 5,250 | <input type="checkbox"/> Symposia - Platinum | \$ 3,500 |
| <input type="checkbox"/> Hotel Key Cards | \$ 11,000 | <input type="checkbox"/> Email Marketing (4 available) | \$ 5,250 | <input type="checkbox"/> Symposia - Gold | \$ 2,500 |
| <input type="checkbox"/> Recharge Lounge | \$ 10,000 | <input type="checkbox"/> Post-it Note Sets | \$ 5,000 | <input type="checkbox"/> Symposia - Silver | \$ 1,750 |
| <input type="checkbox"/> Aisle Signs | \$ 7,750 | <input type="checkbox"/> Breakout Table Decals | \$ 3,150 | <input type="checkbox"/> Symposia - Bronze | \$ 1,000 |
| <input type="checkbox"/> Lanyards | \$ 6,500 | <input type="checkbox"/> MicroBrew Networking Session (Exclusive) | \$ 5,000 | <input type="checkbox"/> Coffee/Refreshment Break | \$ 2,625 |
| <input type="checkbox"/> Conference Pen/Highlighter | \$ 5,250 | <input type="checkbox"/> Standing Sign Advertising | \$ 2,625 | <input type="checkbox"/> Tote Bag Insert (8 available) | \$ 2,000 |

Company Contact: _____

Company Name: _____

Mailing Address: _____

City, State, Zip Code: _____

Telephone: _____ Fax: _____

Email: _____ Website: _____

METHOD OF PAYMENT:

M&M Tax ID # 11-6042333

- Please Invoice
 Check
 Credit Card

In the amount of \$ _____

Credit card payments are only accepted online via Paytrace, our secure online payment website.

[CLICK HERE TO MAKE YOUR PAYMENT](#) (Please note "Sponsorship" in Reference/Invoice field.)

TERMS AND CONDITIONS: Sponsor agrees to pay above indicated sponsorship amount as determined by M&M. Payment is due in full with application. M&M reserves the right to withdraw the sponsorship if payment is not received within 15 business days of receipt of the signed application. Acceptance of this application by M&M constitutes a contract. Sponsorships are non-refundable. We, the undersigned, agree to abide by the above contract terms and conditions.

DATE: _____

AUTHORIZED SIGNATURE: _____ TITLE: _____

This line must be signed for acceptance of contract.