

Opportunities for Exhibitors and Sponsors

EXHIBITORS

Where: All exhibit table-tops will be located in the hotel lobby near the Conference Registration

Price: \$1,500 for a table with two chairs + Conference Registration fee/per person.

Company listing on the website and in the Final Program (no logo).

SPONSORS

All sponsorships include company name and logo on the Conference Website, Final Program, Opening Slide at the Conference, company name listed in the Technical Digest and Welcome Sign in addition to:

Wednesday:

- Sponsor Sign with logo at breakfast
- Sponsor Sign with logo at morning break
- Sponsor Sign with logo at afternoon break

Thursday:

- Sponsor Sign with logo at breakfast
- Sponsor Sign with logo at morning break
- Sponsor Sign with logo at afternoon break

Friday:

- Sponsor Sign with logo at breakfast
- Sponsor Sign with logo at morning break

Wednesday Reception:

• Sponsor Sign with logo at reception

Thursday Banquet:

- Sponsor Sign with logo at banquet
- Verbal recognition and introduction of sponsorship

Other – please contact us at info@mmb2018.org for pricing for sponsorship of namebadge lanyards, program ad space, promotional handout, etc.



Sponsorship Contract

The contract must be fully executed and returned to the address listed below. This agreement for sponsorship is made by and between the Transducer Research Foundation, sponsor of the MMB 2018 Conference and:

PROGRAM LISTING (Info	ormation as it should	appear in Conference	Material)	
Company:				
Mailing Address:				
City:	State: _	Zip: _		Country:
Phone:	Fax:		_ E-Mail:	
Website address:				
CONTACT PERSON Name:				
Phone:		Email:		
Signature:		Position:		
□ Yes, I would like to be□ Yes, I would like to be		\$1,500 ease check desired	sponsorsh	nip)
 Wednesday Thursday Friday Wednesday Reception Thursday Banquet Other 		\$3,000 (1 Continental Breakfast, 2 Session breaks) \$3,000 (1 Continental Breakfast, 2 Session breaks) \$2,500 (1 Continental Breakfast, 1 Session break) \$4,000 \$4,500 \$		
PAYMENT TYPE: □ Check - payable to MN □ Credit Card (VISA, MC		ence		
CC#		Ехр.	Date:	Verification Code:
Name on Card:				
Cardholder Signature:				
Billing Address:				
City:	State:	Zip:		Country:

Please send signed agreement and payment to:

MMB 2018 Conference, c/o 307 Laurel, San Diego, CA 92101-1643 +1-619-232-9499 or fax +1-619-232-0799, sgalloway@pmmiconferences.com