



MEDICAL DERMATOLOGY SOCIETY SPONSOR/EXHIBITOR RESERVATION FORM

Organization _____

Contact Name _____ Title _____

Address _____

City _____ State _____ Zip _____

Telephone _____ Email _____

CORPORATE PARTNERSHIP LEVELS AND BENEFITS

BRONZE: PLEDGE OF \$2,500

- Attendance to the MDS Annual Meeting: Thursday, February 28, 2019
- Signage and Recognition in the MDS Annual Meeting printed program book

SILVER: PLEDGE OF \$5,000

All benefits of Bronze membership status plus:

- Presence of a 6 ft. table top exhibit at the MDS Annual Meeting Network Reception, which immediately follows the professional programming
 - Exhibit table space within the registration area will be dictated by the hotel
- Press release and other print/online collateral acknowledgment
- Access and Recognition at the MDS Annual Business Meeting

GOLD: PLEDGE OF \$10,000

All benefits of Silver membership status plus:

- Option to submit an abstract or poster to be presented at the MDS Annual Meeting

PLATINUM: PLEDGE OF \$25,000 OR MORE

All benefits of Gold membership status plus:

- Preferred opportunities to support specific MDS activities (meeting abstract publication as Journal of American Academy of Dermatology Supplement)
- Meeting with the leadership of MDS at the close of meeting

DIAMOND: PLEDGE OF \$50,000 OR MORE

All benefits of Gold membership status plus:

- Acknowledgment on the cover of the program booklet and on the MDS webpage
- Meeting with the leadership of MDS at the close of the meeting and invitation to meet with the MDS leadership at the summer American Academy of Dermatology meeting

PAYMENT INFORMATION

- Check/Money Order Payable to the "Medical Dermatology Society" in US Currency and Drawn from a US Bank
- Credit Card Information _____ American Express _____ Master Card _____ Visa
- Total Amount Authorized \$ _____

Name on Card (please print) _____

Card Number _____

Expiration Date: _____ CVV 3/4 digit security code: _____

Signature: _____

THIS COMPLETED FORM WITH PAYMENT CAN BE SUBMITTED VIA ONE OF THE SUGGESTED METHODS

Mail Medical Dermatology Society, 526 Superior Avenue East, Suite 340, Cleveland, Ohio 44114
 Email mds@sidnet.org
 Fax 216.579.9333

THANK YOU FOR YOUR SUPPORT OF THE MEDICAL DERMATOLOGY SOCIETY!