The Immunization Partnership

SPONSORSHIP LEVELS



PLATINUM

- Booth in the Exhibition Space
- 2 complimentary hotel rooms (3 nights/room)
- 2 complimentary registrations to the Conference
- 2 complimentary tickets to the Pre-Conference Reception
- An electronic copy of the attendee list with name and organization, as applicable

\$50,000

GOLD

- Booth in the Exhibition Space
- 3 complimentary registrations to the Conference
- An electronic copy of the attendee list with name and organization, as applicable

\$25,000

SILVER

- Booth in the Exhibition
 Space
- 1 complimentary registration to the Conference
- An electronic copy of the attendee list with name and organization, as applicable

\$10,000

BRONZE

- Booth in the Exhibition
 Space
- 1 complimentary registration to the Conference

\$5,000

EVENT AND ACTIVITY SPONSORS

The Immunization Partnership



WEDNESDAY
DINNER WITH
JOHN QUIÑONES
SPONSOR

- Pre-Conference reception sponsor with organization signs and logo
- · Booth in the Exhibition Space
- 3 complimentary hotel rooms (3 nights/room)
- 3 complimentary registrations to the Conference
- 3 complimentary tickets to the Pre-Conference Dinner with John Quiñones
- An electronic copy of the attendee list with name and organization, as applicable
- Limited to 1 sponsor



RISE N'
SHINE
SPONSOR

- Breakfast sponsor for Day 1 and Day 2 with organization signs and logo
- 2 complimentary registrations to the Conference
- Limited to 1 sponsor

\$25,000

YAY, IT'S LUNCH SPONSOR

- Lunch sponsor for Day 1 and Day 2 with organization signs and logo
- 2 complimentary registrations to the Conference
- Limited to 1 sponsor



MOVIE
NIGHT
SPONSOR

- Private film screening sponsor on Day 1 with organization signs and logo
- 2 complimentary registrations to the Conference
- Limited to 1 sponsor



PICK ME UP SPONSOR

- Snack and coffee break sponsor for two breaks on Day 1 with organization signs and logo
- 2 complimentary registrations to the Conference
- Limited to 1 sponsor



THURSDAY COCKTAIL AND NETWORKING RECEPTION SPONSOR

- Cocktail reception sponsor on Day 1 with organization signs and logo
- 2 complimentary registrations to the Conference
- Limited to 1 sponsor



TOTE SPONSOR

- Send your organization's promotional products to include into the Conference tote
- All attendees will receive a conference tote with registration



EXHIBITOR

The Immunization Partnership



The Exhibitor Space will be set up in designated areas with high visibility and foot traffic.

Corporate Single Booth Exhibitor Table: \$3,500 **Not for Profit Exhibitor Table:** \$500

Each Exhibitor package includes:

- 6' table (tablecloth not included)
- Two registrations to conference
- Additional exhibitor conference registration- \$150 each

Exhibitors can set up the day before the conference June 5, 2024 between 1pm - 5pm and must break down their exhibits by 11:30am by the last day of the conference June 7, 2024.



2024 SPONSORSHIP & EXHIBIT APPLICATION

(Print name as it should appear in all printed materials and on your exhibit booth sign)

Sponsor/Exhibitor:	
Company/Organization:	
Contact Person (person in charge of making booth arrangements):	
Address:	City:State:ZIP:
Phone: Fax:	Email Address:
Company WebAddress:	
Names of Exhibit Representatives: Name 1:	
(2 people who will be staffing your booth) Name 2:	
Additional staff at \$150 each :	
	p included in the program, lution jpeg of your logo to it24@immunizeUSA.org
PAYMENT SUMMARY AMOUNT DUE:	
PLATINUM SPONSOR- \$50,000	Corporate Exhibitor Table- \$3,500
GOLD SPONSOR- \$25,000	Not for Profit Exhibitor Table- \$500
SILVER SPONSOR- \$10,000	Additional Exhibitor Conference Registrations- \$150
	Wednesday Dinner with John Quiñones— \$50,000 (one sponsor)
BRONZE SPONSOR- \$5,000	Rise 'n Shine Sponsor for summit— \$10,000 (one sponsor) Yay, It's Lunch Sponsor- \$10,000 (one sponsor)
TOTAL AMOUNT APPROVED TO BE CHARGED	
TOTAL AMOUNT AT NOVED TO BE STIANGED	\$5,000 (one sponsor)
\$	Thursday Cocktail and Networking Reception — \$5,000 (one sponsor)
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☐ Tote Sponsor— \$1,000	
Payment Method: Discover MasterCard Visa American Express Check	
The Immunization Partnership, PO Box 346, Houston, TX 77001	
Name as it appears on credit card:	
CreditCard Number:	Expiration Date:
Security Code/CCV:	
Printed Name:	
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