

# 2010 CIMS FORUM & ANNUAL MEETING SPONSORSHIP AND ADVERTISING APPLICATION



Company/Organization \_\_\_\_\_  
Contact \_\_\_\_\_ Title \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Telephone \_\_\_\_\_ Fax \_\_\_\_\_  
Email \_\_\_\_\_ Website \_\_\_\_\_

## SPONSORSHIP PACKAGES:

**Leader**.....\$750

Electrical Outlet? yes no

Attendee 1: \_\_\_\_\_

Attendee 2: \_\_\_\_\_

**Advocate**.....\$500

Electrical Outlet? yes no

Attendee: \_\_\_\_\_

**Supporter**.....\$250

## EXHIBIT TABLE:

Non-Member.....\$450

CIMS Member.....\$350

Electrical Outlet? yes no

Attendee: \_\_\_\_\_

## ADVERTISING:

### Conference Bag Inserts:

Non-Member.....\$150

CIMS Member.....\$75

### Conference Manual Ad:

Full Page, Full Color.....\$150

Half Page.....\$100

Business Card.....\$50

## OTHER:

In-Kind Donation (please specify): \_\_\_\_\_

CIMS Forum Scholarship Fund Contribution:.....\$ \_\_\_\_\_

## PAYMENT INFORMATION:

A check for \$\_\_\_\_\_ is enclosed  
(payable to CIMS - checks must be drawn on a US bank account)

Credit Card Payment: \$\_\_\_\_\_  
(please circle): VISA MASTERCARD

Card # \_\_\_\_\_ Exp. \_\_\_\_\_

Name on Card \_\_\_\_\_

Signature \_\_\_\_\_

Billing Address (street) \_\_\_\_\_

(city) \_\_\_\_\_ (zip) \_\_\_\_\_

## SPONSORSHIP/ADVERTISING AGREEMENT

In accordance with the conditions governing sponsorships at the Mother-Friendly Childbirth Forum and Annual Meeting of the Coalition for Improving Maternity Services, the undersigned hereby applies for sponsorship and/or advertising which, after acceptance by Coalition for Improving Maternity Services, becomes a contract. The undersigned agrees to abide by all conditions set forth in this agreement. Failure to abide by such results in forfeiture of all monies paid or due under terms of this agreement. (Please copy for your records.)

Signature \_\_\_\_\_ Date \_\_\_\_\_

## SEND COMPLETED APPLICATION TO:

Coalition for Improving Maternity Services, Attn: Heather Blanken,  
1500 Sunday Drive, Suite 102, Raleigh, NC 27607

Or Fax to: 919-787-4916