



CORPORATE SUPPORT AND ADVERTISING APPLICATION

2012 AANS/CNS Section on Disorders of the Spine and Peripheral Nerves Annual Meeting March 7 – 10, Walt Disney World Swan and Dolphin

Billing Information

COMPANY NAME _____

NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

PHONE _____

FAX _____

E-MAIL ADDRESS _____

Visa MasterCard American Express

CREDIT CARD _____ EXPIRATION DATE _____

NAME (EXACTLY AS IT APPEARS ON CARD) _____

SIGNATURE REQUIRED IF PAYING BY CREDIT CARD.
(I AGREE TO PAY ACCORDING TO THE CREDIT CARD ISSUER AGREEMENT.)

Companies supporting or co-supporting an event must comply with all applicable rules and regulations set by the AANS/CNS Section on Disorders of the Spine and Peripheral Nerves and the Walt Disney World Swan and Dolphin. This agreement, signed by a duly authorized representative of the company, and a check in the full amount must be received no later than Thursday, November 17, 2011. This agreement is to become effective upon acceptance by the AANS/CNS Section on Disorders of the Spine and Peripheral Nerves.

Mail

AANS/CNS Section on Disorders of the Spine and Peripheral Nerves
10 N. Martingale Road, Suite 190
Schaumburg, IL 60173-2294

Fax

If paying by credit card, you may fax this application to: (847) 240-0804.

Please note: All corporate support payments are final. Corporate support opportunities cannot be cancelled or refunded once contracted.

Maximize your company's visibility at the 2012 Annual Meeting by becoming a Corporate Supporter today.

Exclusive Ambassador/Partnerships

- Neurosurgical Education Ambassador @ \$ 70,000 = \$ _____
- Power of Networking Ambassador @ \$ 65,000 = \$ _____
- Neurosurgical Leadership Partner @ \$ 60,000 = \$ _____
- Resident Education Partner @ \$ 50,000 = \$ _____
- Future of Neurosurgery Partner @ \$ 50,000 = \$ _____

Individual Corporate Support Opportunities

- Lunch in the Exhibit Hall (Thursday and Friday) @ \$ 25,000 per day = \$ _____
- Continental Breakfast (Co-Support) @ \$ 20,000 = \$ _____
- Beverage Breaks @ \$ 15,000 = \$ _____
- Cyber Café @ \$ 15,000 = \$ _____
- Hotel Key Cards @ \$ 10,000 = \$ _____
- Special Courses – Neurosurgeon/Resident @ \$ 5,000 each = \$ _____
- Special Courses – Nurse/PA @ \$ 2,500 each = \$ _____
- Speaker Grant @ \$ 5,000 = \$ _____
- General Meeting Sponsorships @ \$ 5,000 each = \$ _____

TOTAL AMOUNT CORPORATE SUPPORT

= \$ _____

Due Date: **Thursday, November 17, 2011.**

(Corporate support received after this date may not be acknowledged in all marketing vehicles.)

*What's New Sessions** @ \$ 5,000/2 Sessions = \$ _____

Please Indicate Preferred Times:

Thursday AM Break Thursday Lunch Thursday PM Break

Friday AM Break Friday Lunch

Please note, advertising opportunities are not part of the corporate support program and do not contribute to corporate supporter level or benefits.

*Scientific Program Committee will make final approval of companies participating in the *What's New Sessions* in the Demonstration Theater. The following information must be provided ONE month prior to the meeting:

NAME OF PRESENTER _____

NAME OF PROCEDURE, PRODUCT, OR SERVICE _____