



2012 Annual Conference

Leading the Way: the Next Chapter in America's Health

November 10-11, 2012 • Hilton Alexandria Old Town • Alexandria, Virginia

Sponsorship Opportunities

PIONEER - \$4,000 and above

Your Sponsorship Includes:

- Name-in-title rights on all sponsorship materials in the meeting space
- National recognition of sponsorship on the NPA website and in meeting-related e-communications
- 1/2 page ad in conference program
- Complimentary exhibit space at Conference
- Introduction at Conference by NPA President
- Inclusion in photographs posted on NPA website and distributed to media (post conference)

CHAMPION - \$2,000 to \$3,999

Your Sponsorship Includes:

- Name-in-title rights on all sponsorship materials in the meeting space
- National recognition of sponsorship on the NPA website and in meeting-related e-communications
- 1/4 page ad in conference program
- Complimentary exhibit space at Conference
- Introduction at Conference by NPA President

REFORMER - \$1,000 to \$1,999

Your Sponsorship Includes:

- Name-in-title rights on all sponsorship materials in the meeting space
- National recognition of sponsorship on the NPA website and in meeting-related e-communications
- Business card size ad in conference program

ADVOCATE - \$500 to \$999

Your Sponsorship Includes:

- Name-in-title rights on all sponsorship materials in the meeting space
- National recognition of sponsorship on the NPA website
- Business card size ad in conference program

STEWARD - \$300 to \$499

Your Sponsorship Includes:

- National recognition of sponsorship on the NPA website
- Business card size ad in conference program

PROGRAM BOOK AD - \$150

- Business card size ad in conference program

I/We are unable to attend the 6th Annual NPA Conference. Enclosed is my tax deductible contribution in the amount of _____.

SPONSOR INFORMATION:

Sponsorship Level: _____

Company Name: _____
(as it will appear on NPA materials)

Contact Person: _____

Contact E-mail: _____

Contact phone number: _____

Street Address: _____

City/State/Zip: _____

Company Website: _____

Please email Sponsorship Form to becky.martin@palliance.net

Checks should be made payable to the National Physicians Alliance and mailed to:

**National Physicians Alliance
888 16th Street NW, Suite 800, PMB 835
Washington, DC 20006**