

68th CCMSANNUAL MEETING

Saturday, June 14, 2025, 6:30-9:00pm

Arthrex One Conference Center

Collier County Medical Society cordially invites you to support our 68th Annual Meeting & Installation. The event honors our new President & officers, and features the CCMS Physician of the Year Award. We anticipate over 200 guests will join us for this celebration of Collier County physicians and CCMS.

SPONSORPACKAGES

Presenting Sponsor - \$2,500 (Limit 3)

- Brief remarks at event (2-3 min.)
- Priority Logo placement in event publicity and displayed during event
- · Four event tickets
- Mention in event press release
- Half-page ad in printed event program
- Banner ad in "elert" newsletter or article
- Half-page ad in The Forum magazine (or equivalent upgrade), or an article (800-word max)
- Opportunity to provide a handout and/or an attendee giveaway
- Opportunity to display company's own pop-up banner sign at event, priority location
- · Opportunity to reserve Presenting level for

Sponsor - \$1,250

- Verbal thank you from event emcee
- Two event tickets
- Logo placed in event publicity and displayed during event
- Mention in event press release as sponsor
- Quarter-page ad in printed event programBanner ad in "elert" newsletter or article
- Quarter-page ad in *The Forum* magazine (or equivalent upgrade), or an article (400-word max)
- Opportunity to provide a handout or an attendee giveaway
- Opportunity to display company's own pop-up banner sign at event

Supporter - \$600

- Name placed in event publicity and displayed during event
- One event ticket
- Logo in printed event program
- Opportunity to provide a handout or an attendee giveaway
- Banner ad in "elert" newsletter or
- Mention in The Forum magazine

Additional Dinner Tickets discounted to \$100 for supporters and sponsors

Contact the Medical Society for more details: (239) 435-7727 or april@ccmsonline.org

Registration & payment deadline: May 22, 2025

Sponsor/Supporter assumes entire responsibility and hereby agrees to protect, indemnify, and defend the Collier County Medical Society, Arthrex, the affiliates, officers, employees and partners of each harmless against all claims, losses and damages; including negligence to persons or property, governmental charges or fines and attorney's fees arising out of or caused by Sponsor's installation, removal, maintenance, occupancy or use of the event premises or a part thereof. In addition, Sponsor acknowledges that the indemnified parties do not maintain insurance covering Sponsor's property and that it is the sole responsibility of the Exhibitor to obtain business interruption, property damage and comprehensive general liability insurance. We/I have read and agree to abide by all requirements, restrictions and obligations set forth in this form. We/I further acknowledge that the Collier County Medical Society reserves the right to reject, at its discretion, any application to sponsor.

I have read the above agreeme	ent and agree to the terms:			
	Signature			Date
_		Presenting	☐ Sponsor	☐ Supporter
Company		_ \$2,500	\$1,250	\$600
Primary Contact Person				
Phone	E-mail			
Attendee(s) – includes 4 tickets fo	r Presenting, 2 for Sponsor, 1 for Supporter. \$100	each for additional t	ickets. Qty: _	
Name(s)				
Total Payment \$	□ Bill Me □ Check made out to CCMS	☐ American Expr	ess 🗖 VISA	☐ MasterCard
Name on Card	Signature			
Card #	Expiration D	Date		
Billing Address				