



NEW MEMBERS WELCOME RECEPTION

Thursday, November 19, 2026, 6:30-8:30pm

Vineyards Country Club

Collier County Medical Society cordially invites you to support our annual social event to welcome our new members. Enjoy an evening of networking and refreshments with 150+ attendees, including physicians and their guests.

SPONSOR PACKAGES

Presenting Sponsor - \$2250 (limit 3)

- Premier location display table
- 3 staff tickets
- Logo placed in event marketing, *The Forum* magazine, and at event
- Speaking opportunity (2-3 minutes)
- Half-page ad in CCMS magazine

Sponsor - \$1200

- Display table
- 2 staff tickets
- Name or logo listed in event marketing and at event
- Verbal recognition by event emcee
- Quarter-page ad in CCMS magazine

Supporter - \$600

- Display table (may be smaller size)
- 1 staff ticket
- Name listed in event marketing and event signage as space allows

Sponsor reservations requested by October 29, 2026

Sponsor/Exhibitor AGREEMENT:

Space will be assigned by CCMS staff. Table provided, tablecloths may be available upon request. CCMS will take all reasonable precautions against loss or damage to the exhibit area, but does not guarantee or insure the Exhibitor loss by reasons thereof. Exhibitors may not accept payment by any means from guests or have merchandise delivered to the exhibit area.

Sponsor/Exhibitor RESPONSIBILITY:

Exhibitor assumes entire responsibility and hereby agrees to protect, indemnify, and defend Collier County Medical Society, Vineyards Country Club, 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 Exhibitor's installation, removal, maintenance, occupancy or use of the exhibit premises or a part thereof. In addition, Exhibitor acknowledges that the indemnified parties do not maintain insurance covering Exhibitor'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 Collier County Medical Society reserves the right to reject, at its discretion, any application to exhibit.

I have read the above agreement and agree to the terms: _____
Signature Date

Questions? Call the Collier County Medical Society at (239) 435-7727.

Company _____ Package \$2250 \$1200 \$600

Primary Contact Person _____

Phone _____ E-mail _____

Address _____

Name(s) of Exhibit Staff _____

Total Payment \$ _____ Check made out to CCMS American Express VISA MasterCard

Name on Card _____ Signature _____

Card # _____ Exp. Date _____ Billing Zip Code _____

Return your completed form to: Fax (239) 435-7790, info@ccmsonline.org* or 88 12th St N, Unit 200, Naples FL 34102

*Note: please do not email unencrypted credit card information.

You can also pay online at ccmsonline.org/payments (use CCMS link shown on page)