



NATIONAL MEDICAL FELLOWSHIPS

Changing the face of medicine

SAN FRANCISCO ANNUAL AWARDS GALA

October 28, 2009

Table & Sponsorship Opportunities

Presenter \$25,000

Listing as Presenter
Named Scholarships
Prominent recognition at podium and
in all printed material
Double-page center spread Ad in Event Journal
Table of 12 with VIP placement

Benefactor \$15,000

Listing as Benefactor
Prominent recognition in all printed material
Inside Front or Back Cover Ad in Event Journal
Table of 10 with VIP Placement

Leader \$10,000

Listing as Leader
Recognition in all printed materials
Full-page Ad in Event Journal
Table of 8 with Preferred Seating

Patron \$7,500

Listing as Patron
Half-page Ad in Event Journal
Table of 8 with Preferred Seating

Supporter \$ 5,000

Listing as Supporter
Named Scholarship
4 Tickets with Preferred Seating

Journal Ads

Journal Ads (for those not receiving an ad with a table). BLACK and WHITE High Resolution PDF, In Design, Illustrator or Quark format. 1/8 bleeds accepted on full-page ads only. Half-page ads run in horizontal format. Submit ad to aminaya@nmfonline.org.

Deadline October 13, 2009

- | | |
|---|---------|
| <input type="checkbox"/> Center Spread (15½" x 10 ¼") | \$5,000 |
| <input type="checkbox"/> Inside Front/Back (7 ½" x 10 ½") | \$3,000 |
| <input type="checkbox"/> Full Page (7 ½" x 10") | \$1,500 |
| <input type="checkbox"/> Half Page (7 ½" x 5") | \$ 900 |

Reservation Information

Name	Title	Company	
Address	City	State	Zip
Phone	Fax	E-mail	

Credit Card No. _____

Visa Mastercard Discover American Express Exp. Date _____

Please forward this form with your check made payable to: National Medical Fellowships, 5 Hanover Square, Ste. 200, New York, NY 10004
For any questions or reservations please contact Angelica Minaya, p. 212.483.8880 x 304, f: 212.483.8897, Email: aminaya@nmfonline.org.

All but \$145 of each ticket is tax deductible. All additional gifts are tax deductible to the extent provided by law.

Individual Tickets

Please reserve _____ tickets @ \$350 per person

Alumni Tickets

Please reserve _____ tickets @ \$300 per person

Contributions

We cannot attend, but please accept our contribution of
\$ _____