

NAMI Mississippi Turns 30



The Journey Continues



BECOME A SPONSOR, EXHIBITOR, or ADVERTISER

NAMI Mississippi invites you to participate as a sponsor, exhibitor, and/or advertiser during our annual state conference. Persons living with mental illness, their families, various provider organizations, and public and private agencies, attend our annual meeting for continuing education and networking opportunities. Attendees look forward to networking with exhibitors to learn about services and products.

Indicate below, by checking the appropriate line, which category of support, exhibit, or advertisement you wish to reserve with your payment by April 15, 2019.

STAR SUPPORTER LEVEL

\$5000.00 - PLATINUM STAR SPONSOR

- Recognition as a Platinum Sponsor
- Recognition during each plenary
- Full page ad in conference program (submit black & white ad copy electronically in PDF format)
- Social Media Mentions with Promotions
- 1 Exhibit table
- 2 Complimentary conference registrations
- 4 Tickets to NAMI Turns 30 Gala (Thursday night)
- Friends of NAMI membership

\$2500.00 - GOLD STAR SPONSOR

- Recognition as a Gold Sponsor
- Plenary sponsor signage
- Full page ad in conference program (submit black & white ad copy in PDF format)
- Social Media Mentions with Promotions
- 1 Exhibit table
- 1 Complimentary conference registrations
- 2 Tickets to NAMI Turns 30 Gala (Thursday night)
- Friends of NAMI membership

\$1000.00 - SILVER STAR SPONSOR

- Full page ad in conference program (submit Black & white ad copy electronically in PDF format)
- Listed as a supporting organization for a major segment of the conference in plenary sponsor Signage
- Social Media Mentions
- 1 Exhibit table
- 1 Complimentary conference registrations
- 1 Ticket to NAMI Turns 30 Gala (Thursday night)

SPONSOR/CONTRIBUTOR

BECOME A SPONSOR, EXHIBITOR, or ADVERTISER

\$500.00 SPONSOR

- Listed as a supporting organization for a major segment of the conference in plenary sponsor

\$250.00 CONTRIBUTOR

- Listed as a conference contributor in the conference program.
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EXHIBIT TABLE ONLY

\$350.00 – FOR PROFIT

\$200.00 – NON-PROFIT

PROGRAM ADVERTISEMENT ONLY

must be submitted electronically in PDF format)

(Black & white ad copy

\$550.00 – FULL PAGE

\$350.00 – HALF PAGE

\$225.00 – QUARTER PAGE

NAMI TURNS 30 GALA

(Thursday, May 16, 2019,

7pm at Bridlewood in Madison, MS)

\$55.00 – INDIVIDUAL GALA TICKET

\$700.00 – GALA TABLE TICKET (10 SEATS)

PAYMENT CHECKLIST

_____ STAR SUPPORTER

\$ _____

BECOME A SPONSOR, EXHIBITOR, or ADVERTISER

_____ SUPPORTER/CONTRIBUTOR \$ _____
_____ EXHIBIT TABLE ONLY FOR PROFIT \$ _____
_____ EXHIBIT TABLE ONLY NON-PROFIT \$ _____
_____ ADVERTISEMENT \$ _____
_____ GALA TICKET \$ _____
_____ GALA TABLE (10 SEATS) \$ _____

Total amount enclosed: \$ _____

Payment method: Check Purchase Order Money Order Credit/Debit

CREDIT/DEBIT CARD AUTHORIZATION FORM: By completing this form, you authorize NAMI Mississippi to charge the amount you provided above to your credit/debit card.

Payment method: MC Visa Amex Discover EXP: ____ / ____ CVV: ____

Credit Card # _____

AGREEMENT

Upon receipt of your complete application with payment, you will be notified by email of receipt. Exhibitor assumes responsibility and agrees to indemnify and defend the NAMI Mississippi Chapter and its agent, Belhaven University, and its respective employees and agents against any claims and expenses arising out of the use of the complex premises. Exhibitor understands that if space is reserved all fees are retained by NAMI Mississippi whether or not the exhibitor attends. Exhibitor understands neither NAMI Mississippi nor Belhaven University maintains insurance covering the exhibitor's property, and it is the sole responsibility of the exhibitor to obtain such insurance. Security is not provided on-site by NAMI Mississippi or by Belhaven University after hours. This signature below provides agreement to comply with all exhibitor/supporter/advertisement guidelines, rules and regulations

Authorized Signature: _____

Title: _____ Date: _____

Please return this form to **NAMI Mississippi, 2618 Southerland St, Ste. 100, Jackson, MS 39216**. If you have questions, please call our office at **601.899.9058** or email at stateconference@namims.org.