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Sponsorship Opportunities for MSHA

Revving the Communication Engine in the Motor City: Bridging Research & Clinical Practice

MSHA Annual Conference March 19-21, 2020

MotorCity Hotel & Conference Center, Detroit, Michigan

We are pleased to offer you *Sponsorship Opportunities* at our **March 19-21, 2020 Annual Conference** at **MotorCity Hotel and Conference Center in Detroit, Michigan**. We will ensure that our Sponsors and Exhibitors receive extensive visibility and communication with our conference participants. Special announcements and signage will be made at the conference as well as acknowledgment on our website, in our **Program Book** and newsletter *et cetera*. Along with our traditional **Exhibitor Tables** and **Advertising** options, we offer the following sponsorship opportunities:

- Folders with logo/imprint for all conference attendees: \$800-900 (cost may vary) **Deadline: 2-1-2020.**
- Lanyards: \$1200 (cost may vary depending on artwork)
- Other: (e.g., pens, tote bags, notebooks, etc.) Price may vary depending upon item_____

- Thursday morning Breakfast: \$500
- Thursday Short Course: \$500
- Thursday evening Seminar: \$500
- Thursday evening *Welcome* Reception: \$500 (appetizers and cash bar)

- Friday morning Breakfast: \$500
- Friday Short Course (a.m. or p.m.): \$500
- Friday am or pm Student Sessions: \$500
- Friday MSHA Awards Luncheon: \$2000 (includes full a page ad in **Program Book**) **Deadline: 2-15-20**
- Friday afternoon snack/dessert break: \$500 (fruit, cookies, ice cream, coffee)
- Friday evening Praxis Quizbowl: \$500 (pizza and soft drinks)

- Saturday morning Breakfast: \$500
- Saturday Short Course (a.m. or p.m.): \$500
- Saturday Public School Forum Lunch: \$2000 (includes full a page ad in **Program Book**) **Deadline: 2-15-20.**
- Saturday Medical SLP Forum Lunch: \$2000 (includes full a page ad in **Program Book**) **Deadline: 2-15-20.**

Please check your desired level of sponsorship, complete form below, & send to MSHA **by February 15, 2020.**

Company Name: _____ Your name: _____
 Email address: _____ Phone: (____) _____
 Address: _____
 City & State: _____ Zip Code: _____

Check enclosed for \$ _____ Or Credit Card: VISA MasterCard Discover Card
 Expiration Date: _____ CV Code (back of card) _____

Card Number: _____

Card Holder Name: _____

Authorized Signature: _____

Mission Statement: *The Mission of the Michigan Speech-Language-Hearing Association (MSHA) is to provide professional support and development, public awareness, and advocacy for professionals in communication sciences and disorders and the individuals they serve.*