



Medical Association of the Bahamas

6th Terrace, Centreville

P.O. Box N-3125, Nassau Bahamas

Phone: 242 328-1858, Fax: 242 328-1857

PLEASE PRINT

Organization: _____

Name: _____

Position: _____ Telephone: _____

Postal Address: _____

Email: _____ Fax: _____

Sponsored Item(s) #: _____

Cash, Cheque, Credit Card: _____ Amount Enclosed: \$ _____

SPONSORSHIP OPPORTUNITIES:

- | | |
|---|------------------------------|
| 1. Two (2) sponsored lunch sessions | \$5,000.00 each (30 persons) |
| 2. Six (6) coffee breaks | \$2,000.00 each |
| 3. Conference T-shirts | \$3,000.00 |
| 4. Booth (1) and full page ad | \$2,000.00 |
| 5. Booth (1) and half page ad | \$1,700.00 |
| 6. Booth (1) and 1/4 page ad | \$1,500.00 |
| 7. Each additional booth | \$1,100.00 |
| 8. Full page ad only | \$1,000.00 |
| 9. 1/2 page ad only | \$600.00 |
| 10. 1/4 page ad only | \$450.00 |
| 11. Internist/O&G/Surgeon/Anesthesia/Pediatrician
Radiology/Psychiatry/Pathology/Emergency/Family Medicine
(Individual Physician of the Year Award) | \$500.00 (each) |

Ads for booklets must be in digital form (jpeg or pdf) and emailed to medassocbah@gmail.com. All Checks or Money Orders should be made payable to: **The Medical Association of the Bahamas.**

**FOR COLLECTION PLEASE CONTACT Dr. Valron Grimes 427-4345
or Miss Kendra Dames at 328-1858/7**

**Confirmation of sponsorship is required on or before Friday, January 14th 2017.
All funds must be paid in full no later than Monday February 6th 2017**

Thank you for your patronage!