

KSDVS 2019 Fall Educational Conference Sponsorship Form



Sponsoring Organization: _____

Contact Name: _____

Contact Email: _____

Contact Phone: _____

Sponsorship Level: ____ **Gold** (\$1,000) ____ **Silver** (\$750) ____ **Bronze** (\$300)

Gold Level Sponsorship:

- Email full page ad to be included in Conference Education materials, KSDVS newsletter, and KSDVS webpage to erin.pittman@stelizabeth.com.
- Yes**, I would like to have a vendor “pop-up” table at the KSDVS Conference on Thursday, November 7 at Baptist Health Lexington.
- No**, I am not available to have a vendor “pop-up” table at the KSDVS Conference on Thursday, November 7 at Baptist Health Lexington but I would like to send information and/or samples of my business to be shared at the conference.
- Yes**, I would like to join the KSDVS members for lunch on Thursday, November 7 at Baptist Health Lexington.

Silver Level Sponsorship:

- Email half page ad to be included in Conference Education materials, KSDVS newsletter, and KSDVS webpage to erin.pittman@stelizabeth.com.
- Yes**, I would like to have a vendor “pop-up” table at the KSDVS Conference on Thursday, November 7 at Baptist Health Lexington.
- No**, I am not available to have a vendor “pop-up” table at the KSDVS Conference on Thursday, November 7 at Baptist Health Lexington but I would like to send information and/or samples of my business to be shared at the conference.
- Yes**, I would like to join the KSDVS members for lunch on Thursday, November 7 at Baptist Health Lexington.

Bronze Level Sponsorship:

- Email quarter page ad to be included in Conference Education materials to erin.pittman@stelizabeth.com.
- Yes**, I would like to have a vendor “pop-up” table at the KSDVS Conference on Thursday, November 7 at Baptist Health Lexington.
- No**, I am not available to have a vendor “pop-up” table at the KSDVS Conference on Thursday, November 7 at Baptist Health Lexington but I would like to send information and/or samples of my business to be shared at the conference.
- Yes**, I would like to join the KSDVS members for lunch on Thursday, November 7 at Baptist Health Lexington.

Additional information regarding conference set-up, precise times (will be morning of Thursday, November 7), etc. will be sent closer to the conference dates.

Make Checks payable to: KSDVS

Mailing Address: Erin Pittman, KSDVS Treasurer
28 Carran Drive
Lakeside Park, KY 41017

Questions: Please contact Erin Pittman at (859) 301-2140 or erin.pittman@stelizabeth.com