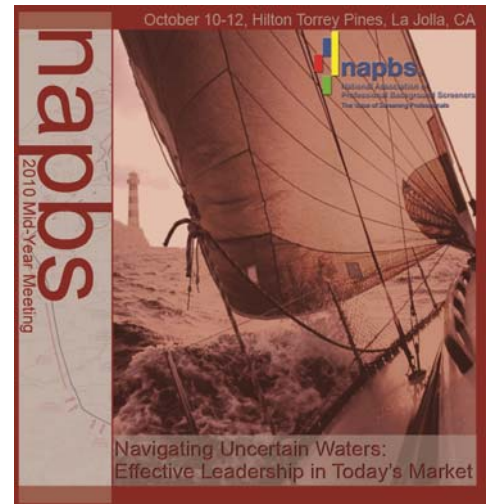


NAPBS 2010 Mid-Year Meeting Additional Sponsorship Opportunities

- Resource Center: \$ 2,500
- Cyber Café: \$ 2,500
- Lanyards: \$ 1,500
- Educational Sessions: \$ 250 per session
- Attendee bag stuffers: \$ 80 per item (no flyers or pamphlets)
- Full page advertisement in program: \$ 350
- Half page advertisement in program: \$ 225
- Quarter page advertisement in program: \$ 100
- Hotel Key Cards: \$ 800 (Sponsor must purchase the keycards)
- New Member Reception: \$ 1,000
- NAPBS Registration Area: \$1,500
- Conference Ambassador Training: \$500
- NAPBS Board of Directors Meeting: \$1,000
- Exhibit Showcase, Sunday, October 10
 - Full Sponsorship: \$19,000
 - Co-Sponsorship: \$9,500
 - Partial Sponsorship: \$4,750
 - Contributing Sponsorship: \$1,500
 - Beverage Sponsorship: \$5,200
- Committee Meeting Breakfasts: \$2,000
- Breakfast in Exhibit Hall, Monday, October 11
 - Full Sponsorship: \$5,000
 - Co-Sponsorship: \$2,500
 - Partial Sponsorship: \$1,250
 - Contributing Sponsorship: \$400
- Lunch in Exhibit Hall, Monday, October 11
 - Full Sponsorship: \$11,500
 - Co-Sponsorship: \$5,750
 - Partial Sponsorship: \$2,875
 - Contributing Sponsorship: \$875



- Exhibit Showcase on, Monday, October 10
 - Full Sponsorship: \$12,200
 - Co-Sponsorship: \$6,100
 - Partial Sponsorship: \$3,050
 - Contributing Sponsorship: \$925
 - Beverage Sponsorship: \$5,200

- Breakfast in Exhibit Hall, Tuesday, October 12
 - Full Sponsorship: \$5,000
 - Co-Sponsorship: \$2,500
 - Partial Sponsorship: \$1,250
 - Contributing Sponsorship: \$400

- Lunch in Exhibit Hall, Tuesday, October 12
 - Full Sponsorship: \$8,000
 - Co-Sponsorship: \$4,000
 - Partial Sponsorship: \$2,000
 - Contributing Sponsorship: \$600

- South of the Border Closing Event, Tuesday, October 12
 - Full Sponsorship: \$16,800
 - Co-Sponsorship: \$8,400
 - Partial Sponsorship: \$4,200
 - Contributing Sponsorship: \$1,260
 - Beverage Sponsorship: \$5,200

Please complete the form below to secure a sponsorship.

Company: _____

Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Email: _____

Payment Information

Check # _____ Make checks payable and mail to: **NAPBS, 2501 Aerial Center Parkway, Ste. 103, Morrisville, NC 27560**

AMEX Visa MasterCard Discover

Card #: _____ Security Code: _____ Exp. Date: _____

Cardholder: _____ Authorized Signature: _____

Billing Address: _____ City/State: _____

Zip: _____ **Total to be charged: \$** _____