Sponsorship Order Form

Please download the form to your desktop before completing to ensure you can sign it properly.

Walter Willett

Sponsorship Relations

E: walter@csam-smca.org

P: (613) 716-9373

Organization Information

Company Name:

Address:

City, Province:

Postal Code:

Primary Contact:

Title:

Email:

Telephone:

Choose Sponsorship Level

- ☐ Platinum $25,000
- ☐ Gold $20,000
- ☐ Silver $15,000
- ☐ Bronze $5,000
- ☐ Exhibit Only $3,500

A La Carte Sponsorship Opportunities

- ☐ Lunch Break $4,000
- ☐ Coffee Break. $2,000
- ☐ Networking Reception $4,000
- ☐ Gala Event. $7,500
- ☐ Mentorship Luncheon. . . .$2,000
- ☐ Water Bottles $1,000
- ☐ Podcast Sponsor . . . $20,000
- ☐ Treatment Facility Tour. . . .$1,000 + Operating Costs

Payment

Choose Method of Payment: ☐ Visa ☐ MasterCard ☐ AMEX ☐ Cheque ☐ EFT

Card Number:

Expiry Date: MM / YY

CSV:

Cardholder Name: (Please Print)

Signature: