



SEC Sponsorship Opportunities Sept. 16-19, 2021

COMPANY INFORMATION *PLEASE PRINT CLEARLY*

Company Name to appear on promotions: _____

Company Contact: _____ E-mail: _____

Primary Phone: Office Cell _____ Business Type: _____

Company Address: _____

City/State/Zip: _____

SPONSORSHIP OPPORTUNITIES

- Gold Sponsorship \$8,000**
(two available)
 - 30 minutes to address group during lunch
 - Logo on website
 - Signage at event denoting sponsorship

- Silver Sponsorship \$5,000**
(three available)
 - 30 minutes to address group during breakfast
 - Logo on website
 - Signage at event denoting sponsorship

- Bronze \$3,000**
 - Logo on website
 - Signage at break denoting event sponsorship

METHOD OF PAYMENT

VISA MasterCard American Express Check made payable to Alabama Academy of Ophthalmology

Name on Card: _____ E-mail address for receipt: _____

Billing Address: _____

City, State, ZIP: _____

Card Number: _____ Exp. Date: _____

Security Code: _____ Signature: _____ Amount: \$ _____

Your signature acknowledges your understanding that sponsors assume all responsibilities and agree to protect against all claims, losses and damages to persons or property; and guarantees payment in full as indicated on this form. Southern Eye Congress and the Medical Association of the State of Alabama shall not be held responsible for any claims, losses and/or damages to persons or property. Southern Eye Congress reserves the right to reject a company or agency as a sponsor without explanation.

Signature: _____ Date: _____

INSTRUCTIONS

Return signed form with your payment to Meghan Martin:
PO Box 1900, Montgomery, AL 36102 • fax (334) 269-5200 • e-mail mmartin@alamedical.org

ALAO Tax ID#: 63-0809050