

Federation of State Massage Therapy Boards 2024 Annual Meeting Sponsorship

| Company/Organization | |
|------------------------|--|
| Contact Person & Title | |
| Street Address | |
| City, State, Zip | |
| Telephone Number | |
| Email | |

SPONSORSHIP LEVELS

| Υe | Yes! We would like to be as sponsor at the following level: | | |
|--------------------------------|---|----------|--|
| Rooftop Welcome Reception | | \$20,000 | |
| Networking Lunches & Breaks | | \$10,000 | |
| Programming/Speakers or Tour | | \$7,500 | |
| Supporter of Public Protection | | \$5,000 | |
| | Friend of the Federation | \$2,500 | |
| | | | |

| Payment Information | | |
|--|--|--|
| Payment: Check (payable to FSMTB) MasterCard Visa Send Invoice | | |
| Cardholder Name: | | |
| Card Number: | | |
| Exp. Date: CVV: | | |
| Billing Address: Street | | |
| City Zip Code | | |
| Cardholder Signature: | | |
| | | |
| Please send sponsorship form and payment (all payment information will be destroyed after processing | | |

FSMTB 7300 College Boulevard, Suite 650, Overland Park, KS 66210 913.681.0380 • fsmtb.org

For more information, please contact info@fsmtb.org or 913.681.0380.