

Vendor Opportunities

From the Massachusetts Chiropractic Society Inc.

Event Date: Safety Net Seminar CONVENTION, March 9th, 2019 from 8:00 am - 5:00 pm

Event Location: Courtyard Marriott, 75 Felton St. Marlborough, MA 01752 (508) 480-0015

PLATINUM SPONSOR

Platinum Sponsor Benefits include:

- Company Display and Text Ad (hyperlinked to your website) on www.MassChiro.org for one year.
- Booth at Both Our Spring and Fall Events
- First Choice of Booth Space at Both Events
- 1/2 Page Advertisement in Our Publication Twice a Year.
- Two Minute Presentation at the Spring and Fall Luncheons
- Mailing List of MCS Members
- Promotional Flyers Placed in All New Member Packets
- Side Banner Listing on Our E-Messenger Twice with a Link to Your Website.
- Podium and Written Sponsor Recognition.

All This For Only \$1200 Annually,

GOLD SPONSOR

Gold Sponsor Benefits include:

- Booth at Both Our Spring and Fall Events
- 1/2 Page Advertisement in Our Publication Twice a Year.
- Mailing List of MCS Members
- Promotional Flyers Placed in All New Member Packets for One Year
- Side Banner Listing on Our E-Messenger Twice with a Link to Your Website.
- Written Sponsor Recognition.

Only \$850 Annually

SILVER SPONSOR

Silver Sponsor Benefits include:

- Booth at Both Our Spring and Fall Events
- 1/4 Page Advertisement in Our Publication Twice a Year.
- Promotional Flyers Placed in All New Member Packets for One Year
- Mailing List of MCS Members

Only \$600 Annually

★ A LA CARTE OPTIONS ★

BOOTH SPACE COST FOR SATURDAY, March 9, 2019:
\$300 per space

PRINT ADVERTISING COST IN OUR NEWS & NOTES:
\$300 full page ~ \$200 half page

A SPONSORSHIP PACKAGE MEANS YOU SUPPORT MCS IN ITS SERVICE TO DOCTORS OF CHIROPRACTIC, THEIR PATIENTS, AND THE CHIROPRACTIC HEALTH CARE INDUSTRY.

Thank You!

INTERESTED IN JUST ADVERTISING ON OUR WEBSITE?

Call the MCS office at (781) 849-0000 for pricing.

GENERAL SPONSOR OPPORTUNITIES.....

Coffee Break Sponsor: \$200 - Written Recognition at the Event and In Our Publication

Mailing Sponsor: \$300 - Include a Full Page Ad in One of Our Mailings to Our Membership. Your cost will only be \$250 if you provide the copies to us.

See schedule of events on back and registration form enclosed.

Massachusetts Chiropractic Society, Inc.
400 Washington St. Suite 102 Braintree, Ma 02184 ■ (781) 849-0000 - phone ■ (781) 848-9941 - fax
www.masschiro.org - website ■ masschirosociety@gmail.com/mcs@masschiro.org - email

SCHEDULE OF EVENTS

Saturday, March 9, 2018

6:30 a.m.

Vendor Set Up Time

7:30 a.m.

Alumni Breakfasts

8:00 a.m. - 5:00 p.m.

Vendor Exhibits Open

8:00 a.m.

Registration for CE Seminar and CA Seminar

9:00 a.m. - 12:00 noon

CE Seminar for DCs

9:00 a.m. - 12:00 noon

Seminar for CAs

10:15 a.m. - 10:45 a.m.

Coffee Break SPONSORED by.....

12:00 noon - 2:00 p.m.

*Luncheon - Everyone Welcome
Purchase Tickets on Registration
Form Enclosed!*

General Membership Meeting

2:00 p.m. - 6:00 p.m.

CE Seminar continues

4:00 p.m. *Vendor and coffee break*

HOTEL ACCOMMODATIONS:

**Courtyard by Marriot
75 Felton St.
Marlborough, MA 01752
508-480-0015**

FOR ROOM RESERVATIONS:

**Call The Courtyard Marriott directly
ask for Megan 508-263-9145 to book
your room.**

**Cost is \$89 + 11.7% tax per room, sin-
gle or double occupancy.**

Check in: 4:00 pm

check out: 12:00 noon

**DEADLINE FOR ROOM RESERVATIONS
IS FEBRUARY 10TH (this will not be ex-
tended due to the low room rate.**

**These rooms will sell out quickly please do
not delay in booking your room reservation.**

Lunch Menu

**Farmers Market Courtyard Table
Soup Du Jour
Rolls and butter**

-(2 will be picked to serve chefs choice)

-Grilled Chicken Breast with marsala wine and mushroom reduction

-Marinated and Grilled to perfection London Broil with onion au jus

-New England Baked Scrod with butter cracker crumbs

**Israeli Couscous with roasted vegetables and
Chopped romain lettuce and mixed greens diced tomatoes, sliced cucumbers, shredded
carrots, red onions, hard boiled eggs, cottage cheese, croutons.
Parmesan cheese and assorted dressings.**

**Assortment of deserts and pastries, cookies and brownies
Iced tea and lemonade**

Massachusetts Chiropractic Society, Inc. ~ March 2019 Sponsorship, Exhibitor & Advertising Application

Vendor Contact Name: _____ Company Name: _____
 Address: _____ City: _____ State: _____ Zip: _____
 Phone: (____) _____ Fax: (____) _____ Product: _____
 Website Address: _____ E-mail: _____

SPONSORSHIPS

* **Platinum:** _____ \$1200 annually
Gold: _____ \$850 annually
Silver: _____ \$600 annually

***IF JOINING AS A PLATINUM SPONSOR, please email a company display ad in jpeg format (165w x 140h pixels) to mcs@masschiro.org and briefly describe company in 25 words or less for the text portion on the MassChiro.org website:**

Coffee Break Sponsor: _____ \$250 **Mailing Sponsor:** _____ \$300 Total enclosed for sponsorships: \$ _____

EXHIBIT SPACE REGISTRATION A LA CARTE (if not joining as a sponsor)

Representatives Attending (Please Print Names and Titles) _____

Please reserve _____ exhibit space(s) at \$300 per space. \$ _____

Will you bring your own booth? Yes _____ No _____ If yes, dimensions of booth: H _____ W _____ D _____

If you are not bringing a booth, **will you require a table?** Yes _____ No _____ **chairs?** Yes _____ # _____ No _____
electricity? Yes _____ No _____ **internet?** Yes _____ No _____

*The fee includes one single outlet (one plug) for 120 volt service for 0-500 watts.

Additional requirements: _____ Extra outlet - \$15; _____ Ext. cord - \$15 \$ _____

SATURDAY NOON LUNCH: _____ Persons @ \$ _____ each: _____ \$29.00 \$ _____
 See Menu on page 2. We hope you join us for lunch.

Total enclosed for exhibit space and lunch: \$ _____

PRINT ADVERTISING REGISTRATION A LA CARTE

_____ March 2019 *News & Notes* Print Advertisement – full page \$300
 _____ Camera Ready Ad Enclosed _____ Repeat Previous Ad

_____ March 2019 *News & Notes* Print Advertisement – 1/2 page \$200
 _____ Camera Ready Ad Enclosed _____ Repeat Previous Ad

Total enclosed for print advertising: \$ _____

METHOD OF PAYMENT: Check or Money Order Enclosed Total amount paid \$ _____
 Visa MasterCard

Credit Card No. _____ Signature: _____

Expiration ____/____(MM/YY) Billing address of credit card (if different than above): _____

If paying by check, make payable to MCS and send to: MCS, 400 Washington St. Suite 102, Braintree, MA 02184 or fax this application with credit card information to 781-848-9941. Ads may be submitted by e-mail in jpeg or pdf format to mcs@masschiro.org/ or to masschirosociety@gmail.com

All advertising with the MCS (including print, web, booth, etc.) and ad content is subject to MCS policies. Ads are accepted and placed at the discretion of the MCS