

LOS ANGELES HEALTHCARE AWARDS

FRIDAY, NOVEMBER 8TH, 2019
FOUR SEASONS BEVERLY HILLS

BENEFITING THE PATIENT CARE FOUNDATION OF LOS ANGELES COUNTY

Exclusive Title Sponsor-\$50,000 (1 Opportunity)

- *Private pre-reception meet n greet with CEO and 10-15 key medical industry leaders
- *Opportunity for 5 minute speaking role during opening remarks
- *Two tables of 10
- *Podium recognition
- *Logo recognition on ALL event collateral (including signage, program print book, email announcements, 5 social media mentions and stage visuals with a dedicated slide)
- *Dedicated ad spread in program print book
- *Opportunity to co-present 5 awards on stage
- *Premiere logo placement/company name on event marquis at the Four Seasons Hotel
- *Homepage logo visibility at losangeleshealthcareawards.com
- *Opportunity to obtain guest list post-event for follow up

Platinum Sponsor-\$25,000 (2 Opportunities)

- *One table of ten
- *Podium recognition with introduction and 60 second description of organization
- *Logo recognition on event collateral (including signage, program print book, email announcements, 5 social media mentions and stage visuals with a dedicated slide)
- *Dedicated one page ad in program print book
- *Opportunity to co-present two awards on stage
- *Logo visibility on sponsorship page at losangeleshealthcareawards.com
- *Exclusive title rights to sponsorship of opening reception

Gold Sponsor-\$10,000

- *One table of ten
- *Podium recognition
- *Dedicated one page ad in program print book
- *Logo recognition on event collateral (including signage, program print book, email announcements, 3 social media mentions and stage visuals with a shared slide)
- *Logo visibility on sponsorship page at losangeleshealthcareawards.com

Silver Sponsor-\$5,000

- *Five tickets
- *Podium Recognition
- *Dedicated 1/2 page ad in program print

Single Ticket-\$325.00

Table-\$3,000.00

Additional Opportunities

All of the below can be combined

- Full page ad in program print book: \$3,000
- Half page ad in program print book: \$1,500
- Qtr page ad in program print book: \$1,000
- Dedicated slide on screen visuals: \$3,000
- Shared slide on screen visuals: \$1,500

Payment

Name: _____

Company: _____

Billing Address: _____

City: _____

State: _____ Zip: _____

Phone: _____

Email: _____

Check: (payable to Patient Care Foundation)

Credit Card
Number: _____

Expiration Date: _____

Sponsorship Level: _____

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