

## 2024 Oral Health Policy Conference Sponsorship Opportunity

Contact: info@oralhealthmissouri.org

The 2024 Missouri Oral Health Policy Conference by the Missouri Coalition for Oral Health will be held on Thursday, March 7, and Friday, March 8, 2024, at the *DoubleTree by Hilton Hotel* in Jefferson City. This important event will help raise awareness of the oral health challenges facing Missouri, while providing a wealth of information about oral health policy.

Your sponsorship of this important event will demonstrate your commitment to improving the oral health of Missouri and will help the Coalition continue to make advances in oral health policy, as well as providing your organization with a unique promotional opportunity. If you have promotional items to add to the conference bags, please contact us at info@oralhealthmissouri.org. Also, we will be encouraging attendees to visit each exhibitor at the conference. Those that visit all may be entered in a drawing for a few prizes. If your organization would like to contribute a prize (e.g., a gift basket) for the drawing, please check the box on the application.

We have had approximately 130 conference attendees each year. They included oral health professionals, representatives of safety-net clinics and health departments, oral health leaders, advocates, policy makers, and community members interested in oral health. We are planning for an increase in attendees at the 2024 conference.

All sponsors will be recognized prominently as leading supporters of the event before, during, and after the conference, including being listed on the Coalition website. All sponsorships include 2024 Coalition membership for the organization. The following sponsorship opportunities are available:

### Premier Sponsor: \$10,000+

Overall event sponsor - Premier Sponsors will have significant presence at the event, with their company/organization name and logo integrated throughout the conference, including –

- Recognition in conference material as Premier Sponsor.
- Recognition during the presentation, including the opportunity to present your organization for 5-10 minutes during the conference.
- > Sponsorship noted in press or media communications.
- > Your logo on conference materials.
- Four complimentary conference registrations, including meals.
- One complimentary exhibit space.

### Contributing Sponsor: \$5,000

- Recognition in conference material.
- Recognition during the presentation, including the opportunity to present your organization for 5-10 minutes during the conference.
- Your logo on conference materials.
- <u>Three</u> complimentary conference registrations, including meals.

#### Sponsor: \$1,000

- Recognition in conference material.
- Recognition during the presentation, including the opportunity to present your organization for 5-10 minutes during the conference.
- > Your logo on conference materials.
- <u>Two</u> complimentary conference registrations, including meals.

Contact us at info@oralhealthmissouri.org to

arrange sponsorship for this one-of-a-kind event.

Thank you for helping to improve the oral health of Missouri!

# 2024 Missouri Oral Health Policy Conference Sponsor Application

| Sponsor Name   |
|--|
| Street Address   |
| City/State/Zip   |
| Company Contact/Title  |
| Email  |
| Phone  |
| <ul> <li>Amount and Type of Sponsorship</li> <li>\$10,000 and above; Premier Sponsor (Includes <u>four</u> complimentary conference registrations)</li> <li>\$5,000 Contributing Sponsor (Includes <u>three</u> complimentary conference registrations)</li> <li>\$1,000 Sponsor (Includes <u>two</u> complimentary conference registrations)</li> <li>Names, credentials, and titles of representatives attending.</li> </ul> |
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| We would like to contribute a prize for the drawing on the last day of the conference.   |
| Each sponsor has the opportunity to present your organization during the conference in a 5-10-minute<br>sponsor focus.   |
| Our company would like to participate in the sponsor focus.  |
| Our company would NOT like to participate in the sponsor focus.  |
| Please provide the logo to be displayed to show your support of the Missouri Coalition for Oral Health.  |
| Mail check with completed and signed application form to:  |
| Missouri Coalition for Oral Health<br>PO Box 1432  |
| lefferson City, Missouri 65102-1432  |
| Checks should be made payable to the <u>Missouri Coalition for Oral Health</u> .   |
| Signed Date  |
| Print Name   |
| Гitle  |