



***Join NYSPA for our 1st Virtual Conference!***

**New York State Perinatal Association  
Conference Exhibitor & Sponsor  
Prospectus**

***NOVEMBER  
5 - 6, 2020***

***Preparing for & Addressing***

***The 4th Trimester:***

***An Interdisciplinary Approach***

***NYSPA Perinatal Partnership Conference:***

***the premier perinatal health conference in NYS.***

**NEW YORK STATE  
PERINATAL ASSOCIATION**

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Fax: 607-772-0468  
E-mail: [nyspa@nysperinatal.org](mailto:nyspa@nysperinatal.org)

## WHY SPONSOR AND EXHIBIT?

The NYSPA Conference draws an average of 200—250 participants from throughout New York with a wide cross-discipline representation of perinatal professionals: obstetricians, pediatricians, neonatal and maternal-fetal specialists, midwives, nurse practitioners, nurses, genetic counselors, social workers, nutritionists, lactation consultants, public health, community-based and social services professionals.

*While it's the Covid-19 pandemic forcing us to go virtual, we are excited to draw even more participants to this year's conference due to no travel requirements and reduced registration rates. This is an even greater opportunity to support NYSPA's advocacy and education, AND to reach even more perinatal professionals!*

### Sponsorship of conference

- **Your** choosing to sponsor NYSPA is the reason we can continue to educate and advocate throughout the year!
- **Your** support is the reason that we continue to be the place where NY comes to discuss regional Perinatal health.
- **Your** sponsorship of the 2020 NYSPA's Perinatal Partnership Conference helps us reduce cost of attendance for allied health professionals from throughout New York State.
- **You** are the reason why NYSPA can continue to be the leader for health professional education of Perinatal health practitioners and the place where NY comes to discuss state, regional and local Perinatal health issues.
- **Our conference** provides a forum for your company to share your products, educational materials, services and research. In appreciation of your sponsorship NYSPA gratefully acknowledges your support through print and social media messaging.

NOVEMBER 5-6, 2020

FROM THIS...




TO THIS!!!



Join with us to share your services, products and information with the health care professionals that lead and practice to assure optimal maternal and birth outcomes.

# Preparing for & Addressing the 4th Trimester: An Interdisciplinary Approach

SPONSOR LEVELS & BENEFITS	EXHIBITORS			SPONSOR LEVELS & BENEFITS					
<p><b>Platinum</b> <span style="float: right;"><b>\$ 3,000</b></span></p> <ul style="list-style-type: none"> <li>20– second “commercial break” video to be aired during conference*</li> <li>Logo &amp; link on conference registration page</li> <li>Screen shots during intro sessions &amp; breaks</li> <li>Advertisement on Back page of conference program</li> <li>Acknowledgement at Awards Luncheon</li> <li>Acknowledgement &amp; logo on NYSPA Website</li> <li>40% Discount for Exhibitor Table</li> <li>Participant contact list</li> <li>Conference attendance for 2</li> </ul>	Entity Type	Exhibit Fee	Benefits	<p><b>Silver</b> <span style="float: right;"><b>\$ 1,500</b></span></p> <ul style="list-style-type: none"> <li>Logo &amp; link on conference registration page</li> <li>Screen shots during intro sessions &amp; breaks</li> <li>Acknowledgement in conference program</li> <li>Acknowledgement at Awards Luncheon</li> <li>Acknowledgement &amp; logo on NYSPA website</li> <li>15% Discount for Exhibitor Table</li> <li>Participant contact list</li> <li>Conference attendance for 1</li> </ul>					
	<p><b>Corporate, Commercial, Company, Insurers</b></p>	\$600	<ul style="list-style-type: none"> <li>Virtual Exhibit hall w/ dedicated break out room for break times</li> <li>Pre-recorded message</li> </ul>	<p><b>Bronze</b> <span style="float: right;"><b>\$ 1,000</b></span></p> <ul style="list-style-type: none"> <li>Logo &amp; link on conference registration page</li> <li>Screen shots during intro sessions &amp; breaks</li> <li>Acknowledgement in conference program</li> <li>Acknowledgement at Awards Luncheon</li> <li>Acknowledgement &amp; logo on NYSPA website</li> <li>10% Discount for Exhibitor Table</li> <li>Participant contact list</li> <li>Acknowledgement on NYSPA website</li> </ul>					
	<p><b>Hospitals, Government Agencies, Non-profits</b></p>	\$300	<ul style="list-style-type: none"> <li>Recognition on conference program and on NYSPA website</li> </ul>						
<p><b>Personal Items, Other Product Sales</b></p>	\$150 + 10% sales or \$225	<ul style="list-style-type: none"> <li>Participant contact list</li> </ul>							
<b><u>Exhibitor Schedule</u></b>									
<b><u>Thursday, Nov. 5, 2020</u></b>									
7:30—8:30 Registration & Exhibits									
11:10—11:30 Break/Exhibits									
12:30—1:30 Lunch/Exhibits									
3:30—4:30 Networking/Exhibits									
<b><u>Friday, Nov. 6, 2020</u></b>									
7:30—8:45 Registration/Networking/Exhibits									
10:50 —11:10 Break/Exhibits									
12:15— 12:30 Break/Exhibits									
<p>Requests for exhibit space is limited and will be reserved on a rolling basis until space is full. Paperwork must be submitted by <b>10/28/2020</b> to assure placement in the conference program.</p> <div style="text-align: center; margin-top: 20px;">  </div>					<p><u>NYSPA Exhibitor Policy:</u></p> <p>NYSPA accept a wide variety of exhibitors to the conference to present all aspects of Perinatal care and health, and support women in all their options and choices.</p> <p>While NYSPA understands that there are legitimate disagreements about the best practices in many aspects of Perinatal care and strives to represent many viewpoints, we also attempt to limit exhibitors to those practicing with the best available science, and those that refrain from methods or practices that results in shaming, blaming or marginalizing of viewpoints, providers, or women who make other choices or disagree with their recommendations.</p> <p>For exhibitors that may be particularly controversial or are likely to challenge viewpoints of attendees, the conference committee has the option to request and review proposed exhibit information prior to acceptance. Exhibition at the NYSPA conference does not imply that an exhibitor represents the opinions or viewpoints of the</p>				

# NYSPA ANNUAL CONFERENCE: EXHIBITOR/ SPONSOR AGREEMENT

PLEASE PRINT OR TYPE

(Name for exhibitor badge) \_\_\_\_\_

Company or Organization Name (This name will appear in the Exhibit Guide) \_\_\_\_\_

Name for exhibitor badge) \_\_\_\_\_

Mailing Address (No P.O. Boxes, please.) \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Type of Exhibitor:

- Corporate
- Commercial
- Company
- Insurers
- Hospitals
- Government Agencies
- Non-profits
- Government Agencies
- Non-profits
- Personal Items
- Other:

Telephone Number \_\_\_\_\_ Fax Number \_\_\_\_\_ Email Address \_\_\_\_\_

Organization description (please check all that apply) Are you a new exhibitor?  Yes  No

<p><b>Major Sponsorships</b> (check those desired)</p> <p><input type="checkbox"/> Platinum Sponsorship      \$3,000</p> <p><input type="checkbox"/> Gold Sponsorship                \$2,000</p> <p><input type="checkbox"/> Silver Sponsorship               \$1,500</p> <p><input type="checkbox"/> Bronze Sponsorship               \$1,000</p> <p style="text-align: right;"><b>Total Sponsorships</b> _____ (A)</p>	<p><b>Exhibition Options</b></p> <p><input type="checkbox"/> Corporate, Commercial, Company, Insurers      \$600</p> <p><input type="checkbox"/> Hospitals, Government Agencies, Non-Profits      \$300</p> <p><input type="checkbox"/> Personal Items, Other Products, Sales      \$150 + 10% sales or \$225</p> <p style="text-align: right;"><b>Total Exhibition Options Fee:</b> _____ (B)</p>
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<b>Total Sponsorships</b>	_____ (A)	<b>Total Exhibition Options Fee:</b>	_____ (B)
<b>Exhibition Options</b>	_____ (B)	<b>Total:</b>	_____ (A+B)

**If paying by check:**

Please make payable to **NYSPA**.  
Indicate: **Sponsor** (& level), **Exhibitor** (& type)

**If paying by credit card:**

Please complete all of the information below to ensure that your credit card is accepted and your payment is approved.  
Credit Card Type:  Visa  MasterCard  American Express

Amount to charge: \$ \_\_\_\_\_

Credit Card #: \_\_\_\_\_ Exp. Date: \_\_\_\_\_ CVN: \_\_\_\_\_

Printed Name on Card (as it appears): \_\_\_\_\_

Payment Authorized by: \_\_\_\_\_ (signature)

Submissions to: **NYSPA, 457 State Street, Binghamton, NY 13901** or email: [nyspa@nysperinatal.org](mailto:nyspa@nysperinatal.org)

