



Corporate Support Application

2009 Congress of Neurological Surgeons Annual Meeting
Ernest N. Morial County Convention Center • New Orleans, Louisiana
October 24-29, 2009



Contact Information

Company Name _____
Contact Name _____
Address _____
City _____ State _____ Zip Code _____ Country _____
Phone _____ Fax _____
E-Mail Address _____

Educational Support Opportunities

<input type="checkbox"/> Abstract CD	\$25,000
<input type="checkbox"/> Beaming Stations	\$30,000
<input type="checkbox"/> Faculty Club	\$80,000
<input type="checkbox"/> Neuro-Hub	\$65,000
<input type="checkbox"/> Digital Poster Center	\$50,000
<input type="checkbox"/> General Scientific Session	\$35,000 (per day)
<input type="checkbox"/> Resident Member Registrations	\$20,000
<input type="checkbox"/> International Society Registrations	\$25,000
<input type="checkbox"/> Walter E. Dandy Orator	\$75,000
<input type="checkbox"/> Young Neurosurgeons Directory CD	\$15,000
<input type="checkbox"/> CNS Original Science Program	\$40,000
<input type="checkbox"/> Featured Speakers	\$35,000 (per Speaker)
<input type="checkbox"/> CNS Resident SANS Challenge	\$25,000
<input type="checkbox"/> Unrestricted Educational Grants	\$_____ (starting at \$5,000)

Networking Opportunities

<input type="checkbox"/> CNS Opening Reception	\$60,000
<input type="checkbox"/> International Reception	\$35,000
<input type="checkbox"/> Resident Recruitment Social	\$20,000
<input type="checkbox"/> Resident/Honored Guest Luncheon	\$15,000

Marketing Opportunities

<input type="checkbox"/> Recharge Stations	\$15,000
<input type="checkbox"/> Beverage Breaks	\$30,000
<input type="checkbox"/> CNS Annual Meeting Registration	\$65,000
<input type="checkbox"/> E-Mail Cafés	\$40,000
<input type="checkbox"/> Message Center	\$20,000
<input type="checkbox"/> Pop-Up Pocket Guide	\$15,000

Payment Information

Amount Enclosed \$ _____
 Visa Mastercard American Express Check
Credit Card Number _____ Exp. Date _____
Name (as it appears on card) _____
Signature (required if paying by credit card) _____

Mail application and payment to:

Congress of Neurological Surgeons, 10 N. Martingale Road, Suite 190 Schaumburg, IL 60173
Phone: 847-240-2500 Fax: 847-240-0804 E-Mail: info@lcn.org