## 2025 MAHC Annual Conference and Exhibition Sponsorship Opportunities

Don't miss your chance to make your business standout & be spotlighted during the conference with attendees!



- Complimentary Exhibit Booth
- Achknowledgement on MAHC's website
- Thank you signage at Annual Conference
- 2025-2026 MAHC Associate Membership

- Promotional materials to be placed in conference bags  $\bigcirc$
- Oral recognition at primary MAHC events held in 2025  $\langle \nabla \rangle$
- List of attendees & contact information  $\bigcirc$
- Recognition on MAHC's Social Media Platforms  $\bigcirc$
- Acknowledgement in Pre-Conference Brochure with a  $\bigcirc$ complimentary half page ad\*



\$2,375

Meals - 4 available



\$2,075

**General Session** 





- Acknowledgement in Pre-Conference Brochure\*
- Oral recognition during the event

- Recognition on MAHC's Social Media Platforms
- Thank you signage at conference







- Acknowledgement in Pre-Conference Brochure\*
- Your logo printed in the item(s)

Recognition on MAHC's Social Media Platforms

\$1,050

Refreshment Break -SOLD, 2 available

- Recognition on MAHC's Social Media Platforms
- Thank you signage at conference

## 2025 MAHC Annual Conference and Exhibition **Sponsorship Opportunities**

I want to be a 2025 Sponsor in the following categories: Exclusive Sponsorships (one company per sponsorship)

Exclusive Sponsorships (one company per sponsorship)	
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General Session (\$2,075) (\$SOLD	SOLD sption
Multiple Sponsorships (multiple	
Meals (4 available, please choose one - \$2,375 each):	Refreshment Break (1 SOLD, 2 available - \$1,050
Wednesday Awards Luncheon	each)
Thursday Exhibit Hall Breakfast	
Thursday Exhibit Hall Lunch	
Friday Breakfast	
Sponsor and Par	yment Information
Company Name:	Name as it appears on card:
Contact Name:	CC#:
Address:	Exp. Date: CVC/CVV (3 or 4 digit code):
City:	☐ Discover ☐Visa ☐Am. Express ☐ MC
State:Zip Code:	Billing Address:
Phone:	City, State, Zip:
Email:	Signature:
Total Sponsorship Fee \$	Paying By:  Credit Card (Please fill out information above)  Check (Mail Form & Payment to: Missouri Alliance for HOME CARE

2420 Hyde Park, Suite A, Jefferson

City, MO 65109)

