



New Hampshire Association for Infant Mental Health

"Celebrating and Engaging Diverse Family Structures"
2024 Annual Conference Sponsor Form

Name of organization or agency _____

Contact _____ Email _____

Please select your sponsorship level

_____ **Friendship Level - \$100 +**

Vendor table, logo in the conference program, and on the webpage.

Amount \$ _____

_____ **Supporter Level - \$500 +**

Benefits of the Friendship Level, plus a quarter-page ad in the conference program, and one registration for the conference.

Amount \$ _____

_____ **Partner Level - \$1,000 +**

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Amount \$ _____

_____ **Advocate Level - \$2,500 +**

Benefits of the Partner Level, with a full-page ad in the conference program, two conference registrations, and keynote speaker sponsorship.

Amount \$ _____

If your donation needs to be restricted, please check here _____

Email form to nhaimh@gmail.com.

Kindly submit payment by check.

NHAIMH Conference Sponsorship 2024

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