



2022 AMM Nexus Sales Representative of the Year

**Tuesday, June 14 | 5 PM ET
Liberty House | Jersey City, NJ**

*Sponsorship Opportunities**

All sponsors will be recognized on the AMM website, in event related emails, on a sponsor sign at the event, and live from the lectern during the event.

\$1,000 Swag for the Bag* (unlimited) (AAFP, EHS, IQVIA, Healio)

\$3,000 NEW: Closing Fireworks Three part sponsorship SOLD - Haymarket, the American Medical Association, TI Health

\$6,000 Nexus Award Statues* SOLD - MJH Life Sciences

\$2,500 Cocktail Napkins* SOLD - The New England Journal of Medicine

\$2,500 Goody Bag* SOLD - Frontline / MDEdge

\$2,500 Lanyards* SOLD - Elsevier

\$1,500 NEW: Cocktail Hour Music SOLD - Wiley

\$1,000 Photography SOLD - Audience Synergy

\$1,000 Signature Cocktail SOLD - American Medical Communications

\$1,000 Treat You Can Trust* SOLD - Cleveland Clinic Journal of Medicine

NOTE: Non-member companies must pay a premium of double the fees for all sponsor levels.

** It is the sponsor's responsibility to purchase the noted item. If you would like the excess to be returned to you, this is at your cost. Otherwise, the items become the AMM's to keep or dispose at our discretion.*

**To secure your sponsorship selection, please sign agreement
and contact mvondeak@ammonline.org or 888-859-8832.**



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Sales Representative of the Year**

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Sponsorship Agreement (Billing address, please)

Contact Name: _____

Company: _____

Address: _____

City: _____ St: _____ Zip: _____

Phone: _____ Email: _____

Sponsorship item selection (on a first come, first served basis). To secure sponsorship:

REQUIRED SIGNATURE:

\$1,000 Swag for the Bag* (unlimited)

~~\$6,000 Nexus Award Statues*~~

~~\$3,000/ca. NEW: Fireworks~~

~~\$2,500 Cocktail Napkins*~~

~~\$2,500 Swag Bags*~~

~~\$2,500 Lanyard*~~

~~\$2,500 NEW: Cocktail Hour Music~~

~~\$1,500 Photography~~

~~\$1,000 Signature Cocktail~~

~~\$1,000 Treat You Can Trust*~~

NOTE: Non-member companies must pay a premium of double the fees for all sponsor levels.

Payment: Check payable to AMM Visa MasterCard AmEx

Credit Card #: _____

Exp: _____ Security Code: _____

Name on card: _____

Cardholder signature: : _____

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Return completed form to events@ammonline.org.