



# 2010 Symposium Sponsorship And Exhibitor Opportunities

**Pennsylvania Organization of Nurse Leaders**

## Sponsor/Exhibitor Registration Form

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Name of Representative Attending Event:	Title:

### SPONSOR OPPORTUNITIES

(Check one)

- Platinum Sponsor            \$5,000
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- Break Sponsor, Day 1        \$1,500
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- Breakfast Sponsor, Day 2    \$1,500
- Exhibitor                         \$1,000

**Register early,  
exhibit space  
is limited.**

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**Please print this form, then complete and return to PONL via e-mail, fax or mail.**

E-mail Address: [vogel@panurseleaders.org](mailto:vogel@panurseleaders.org)

Fax: (412) 344-0599

Mail: 461 Cochran RD, Box #246, Pittsburgh, PA 15228

Phone: (412) 344-1414

***Payment must accompany form unless other prior arrangements have been made.***

***Make all checks payable to: Pennsylvania Organization of Nurse Leaders***