

# ACP WEBSITE SPONSORSHIP ORDER FORM



Please select one:  New website sponsor

Existing website sponsor

Sponsorship Level:  Premium (\$4,995)  Basic (\$995)

Deadlines: Basic Premium  
 Space Reservation: Ongoing January 15\*  
 Sponsorship Form: Ongoing January 30

\*A maximum of five premium sponsorships are available. Contact Linda Chreno for availability.

## Website Listing Information (for new sponsors or existing sponsors with changes):

Company Name	Contact Name
Email	Website URL: http://
Postal Address	
Phone	Fax
Categories Select the categories in which you would like the company/product listed. Each selection over one is billed at \$150. Devices & Major Medical Supplies      Services and Ancillary Supplies (Medical & Non-Medical) <input type="checkbox"/> Compression Stockings & Hosiery <input type="checkbox"/> Consulting & Training Services, Medical <input type="checkbox"/> Laser Equipment for Endovenous Procedures <input type="checkbox"/> Consulting Services, Non-Medical <input type="checkbox"/> Laser Equipment for Topical Procedures <input type="checkbox"/> Pharmaceutical Compounding Services <input type="checkbox"/> Pharmaceutical Products <input type="checkbox"/> Other Ancillary Medical Services & Supplies <input type="checkbox"/> Ultrasound Equipment <input type="checkbox"/> Other Devices or Equipment	

## Contact Information

Company/Ad Agency	Contact Name
Telephone	Fax
Email	

## Payment Information

Check payable for American College of Phlebology (via mail) \$_____	
<input type="checkbox"/> Master Card <input type="checkbox"/> VISA <input type="checkbox"/> American Express <input type="checkbox"/> Discovery (via fax or mail) \$_____	
Card Holder's Name	
Card #	
Security Code	
Exp Date (MM/YY)	
Signature	Date
Card Billing Address	

EMAIL ALL LOGOS AND OR COMPANY/PRODUCT DESCRIPTIONS TO [advertising@acpmail.org](mailto:advertising@acpmail.org)

FAX OR MAIL SPONSORSHIP ORDERS AND PAYMENT TO:  
 AMERICAN COLLEGE OF PHLEBOLOGY  
 101 Callan Avenue, Suite 210, San Leandro, CA 94577-4558  
 510.346.6800 Phone /510.346.6808 Fax  
[www.phlebology.org](http://www.phlebology.org)

For Office Use Only:    Date Received \_\_\_\_\_    Payment Received \_\_\_\_\_    Ad Received \_\_\_\_\_