



VOICES AND VISIONS:
INFLUENCING THE FUTURE OF KENTUCKY HEALTHCARE



2024 KMA Corporate Affiliate Program

The 2024 Annual Meeting of the Kentucky Medical Association will be held Aug. 23-25. After nearly a decade, the meeting will return to a downtown Louisville destination, the Hyatt Regency Downtown, which will offer attendees the opportunity to visit local landmarks, shopping, restaurants, and nightlife.

The 2024 Annual Meeting will once again welcome Corporate Affiliates to enjoy networking and connection with KMA members during the President's Celebration, to be held the evening of Aug. 24. All KMA members and guests are invited to attend this two-hour reception honoring incoming KMA President Evelyn Montgomery Jones, M.D. The event will include drinks, light appetizers, a brief awards presentation and remarks by current President Michael Kuduk, M.D., and Dr. Jones.

Event Sponsorship: \$3,000

2024 Corporate Affiliates will be invited to attend the 2024 President's Celebration, which offers the most exposure to KMA members and guests. Sponsorship includes:

- ✓ Booth during President's Celebration in high-traffic area
- ✓ Admission to the President's Celebration for two attendees, which includes appetizers and drinks
- ✓ Recognition on sponsorship signage and materials
- ✓ Inclusion of company products and/or materials in attendee "swag bags"

*Interested in title sponsorship opportunities? Contact Emily Schott, schott@kyma.org.
The deadline to become a 2024 Corporate Affiliate is July 31.*

Become a 2024 KMA Corporate Affiliate

Company Information

Name: _____

Products/Services Provided by Company: _____

Mailing Address: _____

City, State, ZIP: _____

Phone: _____

Point of Contact Information

Name: _____

Title: _____

Mailing Address: _____

City, State, ZIP: _____

Phone: _____

Email Address: _____

Payment Information: ☐ Check ☐ Credit Card

If paying by credit card, please provide the following. If you prefer to pay over the phone, please contact Debbie Boyd, 502-814-1381.

Name: _____

Billing Address: _____

Card Number: _____

Expiration Date: _____ Signature: _____

Please list the names and contact information for the representatives from your organization who will be attending the President's Celebration on Aug. 24:

Name: _____

Email Address: _____

Name: _____

Email Address: _____

Please fill out this form completely and return, along with a high-resolution logo for your organization, to Emily Schott, schott@kyma.org, by July 31.

All sales are final. No refunds will be given unless event is cancelled.