

# Pediatric Critical Care Medicine Symposium

Oct. 3, 2025



## Sponsorship Opportunities



# Pediatric Critical Care Medicine Symposium

## When & Where

Oct. 3, 2025  
Le Bonheur Children's  
Hospital  
Russell Chesney  
Auditorium  
50 N. Dunlap St.,  
Memphis, TN 38103

## Contact

Margaret Ross Davis  
margaretrosslong@gmail.com

## Registration Deadline

Friday, Sept. 26, 2025

## Display Dates & Times

Friday, Oct. 3, 2025  
7:20 a.m. - 5 p.m.  
Breaks: 10 a.m., 12:20 p.m.,  
3:20 p.m.

*Please contact us as  
soon as possible to  
reserve your space.*

## Sponsorship Opportunities

### Platinum Level \*

**\$1,500**

*\* Lunch sponsorship. Limited to one sponsor.*

- **Your company name on the conference event page**
  - Company name will be linked to a page dedicated to your company, including descriptions, links and contact information
- **Special recognition on conference poster**
- **Admission and exhibit table for up to two people**

### Gold Level \*

**\$1,000**

*\* Breakfast or break sponsorship. Breakfast is limited to one sponsor, and breaks are limited to two sponsors. Sponsor can decide which they would like to support.*

- **Your company name on the conference event page**
  - Company name will be linked to a page dedicated to your company, including descriptions, links and contact information
- **Special recognition on conference poster**
- **Admission and exhibit table for up to two people**

### Silver Level \*

**\$750**

*\* Exhibitor sponsorship*

- **Your company name on the conference event page**
  - Company name will be linked to a page dedicated to your company, including descriptions, links and contact information
- **Special recognition on conference poster**
- **Admission and exhibit table for up to two people**

## Pay online or make checks payable and mail to:

Methodist Healthcare Foundation  
PO Box 42048  
Memphis, Tenn. 38174-2048  
Attn.: JoAnn Franklin

*(Please write "2025 Critical Care Symposium" for the memo line on the check.)*

<http://www.lebonheur.org/PCCsponsor>

Once payment has been received, no refunds will be allowed.

Funds must be received by Sept. 26, 2025. Exhibit fees not received by Sept. 26 must be paid by credit card.

# Pediatric Critical Care Medicine Symposium

## Exhibit Space Application

Company Name: \_\_\_\_\_

Primary Contact: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Additional Contacts:

Name: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_ Email: \_\_\_\_\_

### Please choose your sponsorship level:

☐ Platinum Level (\$1,500)      ☐ Gold Level (\$1,000)      ☐ Silver Level (\$750)

Submission of this signed form to Le Bonheur Children's Hospital constitutes your commitment to serve as a supporter and your agreement to pay \$\_\_\_\_\_.

Signature: \_\_\_\_\_

Title: \_\_\_\_\_ Date: \_\_\_\_\_

Booths will not be reserved without payment in full. Please return application with either your online payment confirmation using the link below or your check made payable to Le Bonheur Children's Hospital to the address below (\*Please be sure to address envelope with all information below.):

<http://www.lebonheur.org/PCCsponsor>

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PO Box 42048  
Memphis, Tenn. 38174-2048  
Attn.: JoAnn Franklin  
*(Please write "2025 Critical Care Symposium" for the memo line on the check.)*

Tax ID: 23-7320638

If you have any questions, please do not hesitate to contact [margaretrosslong@gmail.com](mailto:margaretrosslong@gmail.com).