



## Partner Form

Please complete if you are interested in serving as a NAMSAP partner. If you have any questions about partnering, please contact us at [info@namsap.org](mailto:info@namsap.org) or 407-647-8839. The main contact information below needs to be for one of your Professional Memberships.

### Main Contact Information

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Title: \_\_\_\_\_ Company: \_\_\_\_\_

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

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

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_ Website: \_\_\_\_\_

### Sponsorship Levels:

Yes, my company has reviewed the benefits of sponsorship and has agreed to support the National Alliance of Medicare Set-Aside Professionals, Inc.

- Platinum \$5,000                       Gold \$2,500                       Silver \$1,000  
(Please choose the level of sponsorship you are interested in.)

### Payment Information:

- Check                                       Credit Card (NAMSAP only accepts MasterCard or Visa)

Please charge my credit card \$ \_\_\_\_\_  Master Card                       Visa

Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_ Security Digits: \_\_\_\_\_

Name on Card: \_\_\_\_\_

Address (if different from above) \_\_\_\_\_

**Checks can be mailed to NAMSAP** ● 341 North Maitland Avenue, Suite 130 ● Maitland, FL 32751

Telephone: 407-647-8839 ● Fax: 407-629-2502 ● [info@namsap.org](mailto:info@namsap.org)

Partnership is valid for twelve months from the date payment is processed. **Date Processed:** \_\_\_\_\_

# Partner Application Instructions

## Professional Memberships

- Platinum - 3
- Gold - 2
- Silver – 1

## Representatives\*

up to 197 / Quantity: \_\_\_\_\_  
up to 98 / Quantity: \_\_\_\_\_  
up to 39 / Quantity: \_\_\_\_\_

\*Representative applications are only accepted in excel format with the following fields.  
Only one upload at time of initial application, is allowed.

Prefix

First Name

Middle Initial

Last Name

Suffix or Credentials

Title

Company

Address 1

Address 2

City

ST

Zip

Telephone

Fax

Email

ListServ Email (If left blank the representative will not be listed on the ListServ)

### **○ Platinum Partner Application, we need:**

Partner Form

Three (3) Paper Membership Applications\*\*

Company Logo will be used for website, signage and newsletters (sent via email)

Link for your home page of your website (sent via email)

Company Profile (company description in 30 words or less) (sent via email)

Representatives Excel Spreadsheet for Upload (up to 197).

Main Contact will be responsible for supplying the member's only login/password to their Representatives.

**Annual Conference:** Table Top Exhibit Registration form. We will supply a code for online registration for your 3 Complimentary Annual Conference Registrations and up to 197 - 30% discount for representatives wanting to attend Annual Conference.

### **○ Gold Partner Application, we need:**

Partner Form

Two (2) Paper Membership Applications\*\*

Company Logo will be used for website (sent via email)

Link for your home page of your website (sent via email)

Representatives Excel Spreadsheet for Upload (up to 98).

Main Contact will be responsible for supplying the member's only login/password to their Representatives.

**Annual Conference:** We will supply a code for online registration for your 2 Complimentary Annual Conference Registrations and up to 98 - 30% discount for representatives wanting to attend Annual Conference.

### **○ Silver Partner Application, we need:**

Partner Form

One (1) Paper Membership Application\*\*

Company Logo will be used for website (sent via email)

Link for your home page of your website (sent via email)

Representatives Excel Spreadsheet for Upload (up to 39).

Main Contact will be responsible for supplying the member's only login/password to their Representatives.

**Annual Conference:** We will supply a code for online registration for 1 Complimentary Annual Conference Registration and up to 39 - 30% discount for representatives wanting to attend Annual Conference.

\*\*NAMSAP Paper Membership Application: [http://www.namsap.org/pdf/NAMSAP\\_MembApp.pdf](http://www.namsap.org/pdf/NAMSAP_MembApp.pdf)