

2026

August 27 – 29, 2026 | Columbus, Ohio

# AmSECT Pediatric and Congenital Perfusion Conference

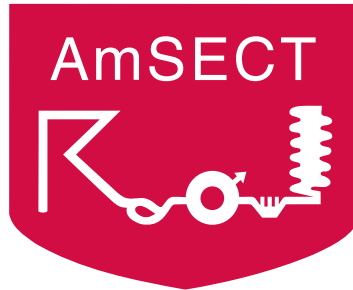
AmSECT



Sponsorship Opportunities



**NATIONWIDE CHILDREN'S®**  
*When your child needs a hospital, everything matters.*

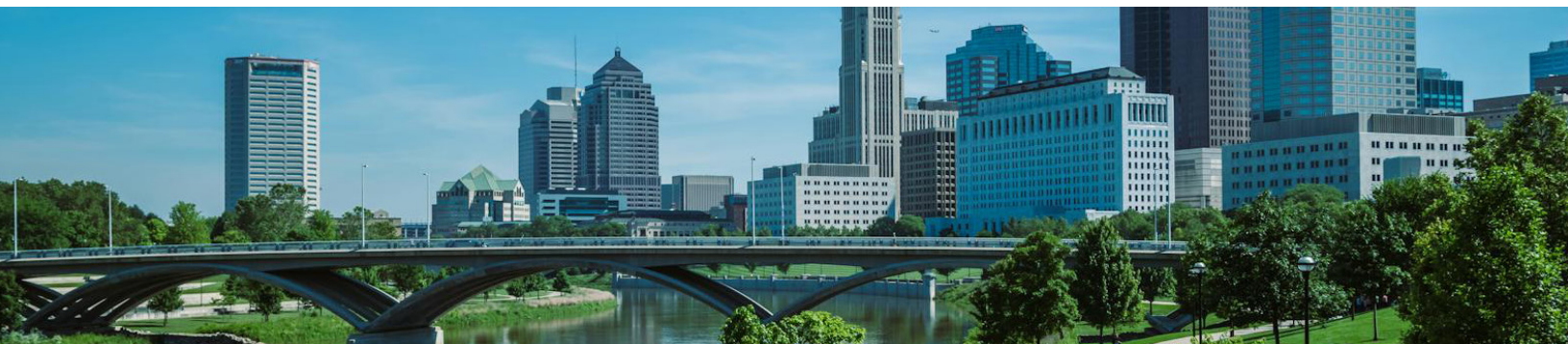


# Partner with AmSECT at the 2026 Pediatric and Congenital Perfusion Conference.

AmSECT is the leading organization for the profession, serving more than 2,000 members. Professionals at every career stage benefit from AmSECT's wide range of programs and services.

Partnering with AmSECT is the ideal way for your organization to connect with key decision-makers and business influencers in order to become the solution of choice. Cut through the competition by building relationships that matter – help brighten your organization's tomorrow!

Looking for more opportunities to partner with AmSECT? Learn more at [amsect.org](https://amsect.org).



# SPONSOR OPPORTUNITIES

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## **Industry Symposium** \$7,500

*3 Breakfast slots and 2 Lunch slots available*

Opportunity to host an industry symposium onsite at AmSECT's Pediatric Conference.

## **Social Reception**

\$2,500

*1 available*

Exclusive sponsor of AmSECT's Pediatric Conference social reception on August 28, 2026.

## **Lanyard**

\$2,500\*

*1 available*

Exclusive sponsor of the Pediatric Conference lanyards.

*\*plus cost of lanyards*

## **Tote Bag**

\$2,500\*

*1 available*

Exclusive sponsor of the Pediatric Conference tote bags.

*\*plus cost of tote bags with sponsor input*

## **Mobile App**

\$2,500

*1 available*

Exclusive sponsor of the onsite event app.

*Sponsor will receive prominent feature position within app*

## **Breakfast and Coffee** \$1,500

*1 per day available*

Exclusive sponsor of the coffee and breakfast with logo recognition on stations.



# ADDITIONAL OPPORTUNITIES

## Exhibitor Only

\$1,500

Feature your services or products in our exhibit hall. Expand your reach with the right audience.

- 6 ft table and two (2) chairs included
- Pre- and post-event attendee list
- Two (2) complimentary representatives included

*All exhibitors and sponsors receive logo recognition on AmSECT's website and onsite signage.*

## Breakout/Meeting Rooms

\$2,500

Breakout Rooms for Hands-On Sessions and Small Meeting Rooms

- Opportunity to secure a private meeting room for your team to utilize throughout the conference.
- These rooms can be used for small meetings, hands on breakouts, or for your team to connect internally.
- Opportunity to coordinate F&B through the venue.

# VENUE INFORMATION

**Nationwide Childrens**  
**700 Children's Dr**  
**Columbus, OH 43205**  
**United States**

An optional pre-conference hospital tour and workshop will be held on August 26.



# REGISTRATION FORM

## Exhibitor and Sponsor Information

Contact Name: \_\_\_\_\_

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

Organization (as you want it listed on promotional materials): \_\_\_\_\_

Organization Website: \_\_\_\_\_

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

City/State/Province/Zip: \_\_\_\_\_

Country: \_\_\_\_\_

Phone: (\_\_\_\_\_) \_\_\_\_\_

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

Brief description of product or services (as you would like it listed in the program and website): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**❑ REQUIRED: By registering as a sponsor or exhibitor, I agree to the terms and policies found at [amsect.org](https://amsect.org).**

## Payment Information

Total Payment Enclosed: \$ \_\_\_\_\_

Method of Payment: ☐ Check enclosed, payable to AmSECT

☐ VISA ☐ MasterCard ☐ American Express ☐ Discover

Card Number \_\_\_\_\_

Exp. Date \_\_\_\_\_ 3/4-digit Security Code (req.): \_\_\_\_\_

Cardholder Name (print) \_\_\_\_\_

Cardholder Phone \_\_\_\_\_

Billing Address \_\_\_\_\_

City \_\_\_\_\_

State/Zip/Country \_\_\_\_\_

Cardholder Signature \_\_\_\_\_

## American Society of Extracorporeal Technology

1601 Utica Avenue South, Suite 213 Minneapolis, MN 55416

Phone: 1+ (651) 203-7248 | [amsect@amsect.org](mailto:amsect@amsect.org)

## Additional Representatives

Sponsors and exhibitors include **two (2) complimentary registrations**. Additional representatives must pay an additional \$250/per representative.

☐ Included

Name(s): \_\_\_\_\_

☐ Additional Rep: \$250

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

☐ Additional Rep: \$300

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

## PLEASE INDICATE EXHIBITOR/SPONSOR SELECTION:

☐ **Industry Symposium Sponsor** \$7,500

☐ Thursday Breakfast ☐ Friday Breakfast ☐ Saturday Breakfast

☐ Thursday Lunch ☐ Friday Lunch

☐ **Social Reception Sponsor** \$2,500

☐ **Lanyard Sponsor** \$2,500 + cost of lanyards

☐ **Tote Bag Sponsor** \$2,500 + cost of totes

☐ **Mobile App Sponsor** \$2,500

☐ **Breakfast and Coffee Sponsor** \$1,500

☐ Thursday ☐ Friday ☐ Saturday

☐ **Meeting/Breakout Room** \$2,500

☐ **Exhibitor Only** \$1,500

☐ **Additional Exhibitor Representative(s)** \$250/each

QTY: \_\_\_\_\_

**TOTAL \$** \_\_\_\_\_

**TO REGISTER, PLEASE SEND COMPLETED FORM TO:**  
**[BLAKE.FINGER@AMSECT.ORG](mailto:BLAKE.FINGER@AMSECT.ORG)**

**Registration will be confirmed upon receipt of payment.**

*AmSECT requests that high-resolution logos from sponsors be sent to [blake.finger@amsect.org](mailto:blake.finger@amsect.org)*