



# WCPAG19

19th FIGIJ World Congress of Paediatric and Adolescent Gynaecology

30 November - 3 December 2019 | Melbourne

## SPONSORSHIP FORM

### Personal Details

Please note all correspondence including invoices will be sent to the contact supplied below.

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

Contact Person \_\_\_\_\_

Position \_\_\_\_\_ Email \_\_\_\_\_

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

Address \_\_\_\_\_

State \_\_\_\_\_ Postcode \_\_\_\_\_

Country \_\_\_\_\_ Website \_\_\_\_\_

### Sponsorship Opportunities

Please tick appropriate box. All sponsorship prices are in AUD and inclusive of 10% GST (Goods and Services Tax)

#### Sponsorship Opportunities

GOLD PARTNERSHIP \$30,000

SILVER PARTNERSHIP \$20,000

Reusable Water Bottle \$7,700

Portable Device Charging Station \$5,500

Note Pad and Pen \$4,400

#### Individual Sponsorship Opportunities

##### SOCIAL FUNCTIONS

Welcome Reception \$12,000

Congress Dinner \$10,000

##### DELEGATE SERVICES

Conference App \$11,000

Reusable Coffee Cup \$10,500

Barista Station \$7,700

Juice Station \$7,700

##### EDUCATIONAL

Plenary Session \$5,000

Lunchtime Sessions \$3,300

##### ENHANCE YOUR EXPOSURE

App Insert \$2,200

Advertisement in the Conference Program

Full Page \$2,200

Half Page \$1,100

I agree to be invoiced for a total of \$ AUD \_\_\_\_\_ including 10% GST for the items selected above.

Signature \_\_\_\_\_

Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Sponsorship agreement and tax invoice will be sent upon receipt of your application form.

**Sponsorship Total** \_\_\_\_\_



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## EXHIBITION FORM

### Exhibition Booth Requirements

Priority of placement within the exhibition will be offered to sponsors first and then sold in accordance with the date of application receipt.

Preferred exhibition location:

First Choice: \_\_\_\_\_

Second Choice: \_\_\_\_\_

Third Choice: \_\_\_\_\_

#### CONDITIONS OF PAYMENT

- Payment of a 25% deposit is required upon confirmation of your sponsorship and exhibition selections. 25% of the balance owing will be due 12 months prior to the event commencing.
- The remaining 50% will be due 6 months prior to the event commencing. This will enable payments over multiple financial years.

### Exhibition Confirmation

|  | Cost (AUD)           | Total inc GST |
|--|----------------------|---------------|
| <input type="checkbox"/> Exhibition Booth                  | \$4,400 incl 10% GST | _____         |
| <input type="checkbox"/> Table top display 6 square metres | \$2,200 incl 10% GST | _____         |
| <input type="checkbox"/> Additional Exhibitor Registration | \$500 incl 10% GST   | _____         |

Declaration: I have read & accept the terms & conditions in the prospectus and wish to become an exhibitor at WCPAG 2019.

I agree to be invoiced for a total of \$ AUD \_\_\_\_\_ incl GST.

Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Application forms may be emailed to the contact listed below.

A tax invoice will be sent upon receipt of your application form.

Exhibition Total \_\_\_\_\_

### Method of Payment

Tick appropriate box

- I wish to pay by bank transfer. Bank details will be supplied on your tax invoice issued with confirmation
- I wish to pay by credit card. A link will be sent to you via email to complete payment online.

Please Note: All credit card payments will appear as "ICMS Australasia Pty Ltd" on your statement

### Forward completed application forms to:

**Shelley Turner**

**WCPAG Sales and Operations Manager - Sponsorship and Exhibitions**

**Level 2, 120 Clarendon St**

**Southbank, VIC, 3006**

**Tel: 03 9682 0500**

**Email: shelleyt@icmsaust.com.au**