Sponsorship & Exhibition Booking Form

Please post or email this form to:		Australasian Division of PO Box 74, Cherrybrook, NSW 212	Tel: +61 2	nal Academy of Pathology Tel: +61 2 9894 6811 Email: info@iap-aus.org.au		
Company Name						
Contact Name				Р	osition	
Postal Address						
Suburb			State	Р	ostcode	
Telephone ()	Fax ()		N	Лobile	
Email				٧	Vebsite	
Exhibition book Please confirm your I	_	kage selection below (p	lease tick)	. All prices are <i>A</i>	Australian Doll	lars.
Bronze Exhibitor (3 x	3m stand) \$5	,000 + GST per booth	Tot	al Number of b	ooths require	d
Silver Exhibitor (6 x 3	m stand) \$9,0	000 + GST per booth	Ext	nibition Total A	mount \$	
Sponsorship bo Please confirm your S Platinum Sponso	Sponsorship s	selection below (please t GST	ick). All pr			ng (hosting) \$8,000 + GST
Gold Sponsor - \$				·		nosting) \$10,000 + GST
International Ke	ynote Speake	r Sponsor - \$10,000 + GS	Т	Poster Zone \$5	,000 + GST	
Session Sponsor	- \$5,000 + GS	т		Name Card Spo	onsorship \$2,50	00.00 + GST
Cocktail Party Sp	onsor - \$10,0	00 + GST				
Lunch Sponsor 3	B Days - \$10,00	00 + GST	ADV	/ERTISING SPO		
Lunch Sponsor F	riday Buffet L	uncheon - \$5,000 + GST		Merchandise(s)	Sponsor (at yo	ur cost)
Lunch Sponsor S	Saturday Buffe	et Luncheon - \$2,500 + G	ST			
Lunch Sponsor S	Sunday Buffet	Luncheon - \$2,500 + GST	Γ			
Morning & After	noon Tea Spo	nsor - \$2,500 + GST	Sponso	orship Total An	nount \$	
March 2024. Paymen	ired to secure ts can be mad	e your Sponsorship/Exhil le via EFT, Visa or Master at info@iap-aus.org.au f	Card. Plea	ase select a pay		
Master card	VISA		TOTAL	AMOUNT PAYA	ABLE \$	
If paying by Visa or M	aster Card, p	lease complete the deta	ils below.			
Card number			Expiry D	ate (MM/YYYY)		
Full name on card						
Amount to be debited	i					
Signature			Date			
commencing. If a confirme or Sponsors after this date	d Exhibitor or Spo An Exhibition/Sp	should be received in writing ar onsor cancels before 29 March a onsorship trade kit, detailing in	2024 a 50% c nformation re	ancellation fee will a garding the exhibiti	apply. No refunds	will be issued to Exhibitors
	ancellation p	olicy and accept all of its				
Name			Company	•		
Signed			Date			

YES, I give permission to IAP to share my details with suppliers and contractors of the Conference venue and also agree for any photographs taken of any/all our staff can be posted on the IAP website.

PRIVACY STATEMENT

NO, I do not consent.