

NURSING & MIDWIFERY LEADERS CONFERENCE 2021

Ref

3 November Welcome Reception – The Ship Inn 4 - 5 November – Conference - Brisbane Convention & Exhibition Centre

Sponsorship Booking Form

A. SPONSOR / TRADE	EXHIBITOR INFORMATION (please use	e CAPITAL letters and print clearly)
Title Last	Name	First Name
Organisation		Position
Postal Address (Number/Stree	⊇t)	
Suburb		State Postcode
Privacy Notice		Email
The primary purpose for collecting	g the Conference and will only disclose this information f	cess your registration. We will only use these details to keep you informed offuture for the benefit of this event (subject to strict conditions). If you DO NOT wish your
B. SPONSORSHIP		
Partner Levels: Platinu	m < \$7,500 Gold < \$5,700.00 Silver < \$	4,000.00 Supporting Partner < \$3,050 (All Exclude GST)
OPPORTUNITIES (Tick th	ne boxes of your chosen Partner opportun	ities) (All Exclude GST)
☐ Nursing & Midwifery Leaders Awards Partner \$7,000.00		☐ Lanyard or Pen Partner \$1,150.00
Scholarship Partner - \$6,200.00		☐ Coffee Cart Partner \$1,000.00
☐ Keynote Speaker Partner - \$3,200.00		☐ Welcome Reception Partner \$500.00
		☐ Satchel Insert Partner \$365.00
☐ Invited Speaker Partner \$1,200.00		Lead Capture \$250.00
☐ Event Stream Wall Partner \$ 2,300.00		
Conference Satchel or Merchandise Partner \$2,750.00		
	Total Partner Opportunities:	\$
C. TRADE BOOTH PAG	CKAGE	
Booth Dimensions:	3.0m wide x 2.4m deep x 2.4m high	
Standard Inclusions:	 Two (2) x Exhibitor Delegate Registration – including Morning Tea, Lunch & Afternoon Tea (Thursday), Arrival Tea & Coffee, Morning Tea & Lunch (Friday) & AQNML Awards Dinner (Thursday evening) Wall Panelling (Velcro compatible) Fascia across the front of each booth and One (1) x Company name Sign mounted on fascia Two (2) x 150-watt spotlights, one (1) x 4 amp power supply and one (1) Trestle table/cloth/2x chairs (Moreton Hire supplied) Contact Exchange & Digital Trade Passport 	
D. TRADE BOOTH - AD	DITIONAL INFORMATION	
TRADE BOOTH LOCATION - P	lease list four (4) preferences for your booth location: (R	Refer to the floor plan provided in the Prospectus)
Preference One (1) Preference Two (2) Preference Three (3) Preference Four (4) Preference Four (4) Preference Four (4) Preference Four (4) Preference Four (5) Preference Four (6) Preference Four (7) Preference Four (8) Preference Four (9) Prefere		
your preferences be unav- selection. *Trade Venue a	ailable due to previously confirmed exhibitor nd Floor plan are subject to change. Booth a	st-service basis and then in order of selected preference. Should all rs, you will be notified of remaining booths available for your llocation may change at the Conference Committee's discretion. our Fascia in the boxes below: (Maximum of 30 letters including spacing).
E. PUBLIC LIABILITY IN	NSURANCE	
I will forward a copy of	f my Company's Public Liability Insurance Certifica	ate of Currency (valid over dates of the Conference) to the value of AUD \$20 million
F. PAYMENTDETAILS		
A confirmation letter and tax invoice will be forwarded to you upon receipt and processing of this form. Full payment for fees MUST be received prior to the Conference. Please identify your chosen payment method below.		
☐ Tax Invoice/EFT – p	payment details included on the tax invoice e	emailed with your confirmation.
CREDIT CARD UISA/MASTERCARD (An online payment link will be included on the Confirmation Email.		
G. CANCELLATION PO	DLICY	
		oition Registration Form is received by Conference Managers will attract a cancellation

fee equal to 100% of Sponsorship and/or Booth Package Fee.