



## GESA AGW 2019 Sponsor and Exhibitor Application Form

To apply, complete this form and email to: [gesa@gesa.org.au](mailto:gesa@gesa.org.au)

**Important:** Your organisation's inclusion will be confirmed in writing and will become effective once agreed payment has been received by GESA.

### SPONSOR/EXHIBITOR DETAILS

Company Contact Name (All information will be addressed to this person)		
Position	Email	
Telephone	Mobile	
Organisation Name (for invoicing)		
Organisation Name (for printed materials)		
Industry Sector		
Address		
State	Country	Postcode
Onsite Contact Name	Position	
Email	Mobile	

### INSURANCE DECLARATION

Name of Insurer	Policy Number
Expiry Date	Insured Amount AUD\$
My signature below denotes that I agree to being invoiced for the total amount payable, and am authorised to make the commitment on behalf of my organisation. I have read the sponsorship & exhibition opportunities document and I understand and accept the inclusions, and agree to abide by the terms and conditions of participating in this event.	
Name	Position
Signature and Date	
<input type="checkbox"/> I have attached a copy of our certificate of Insurance.	

**SPONSORSHIP PACKAGES** (All entitlements will be assumed and actioned automatically)

<input type="checkbox"/> Platinum 12m × 6m – \$67,500 + 10% GST	\$	+ \$	(GST) = \$
<input type="checkbox"/> Gold 9m × 6m – \$45,000 + 10% GST	\$	+ \$	(GST) = \$
<input type="checkbox"/> Silver 6m × 6m – \$31,500 + 10% GST	\$	+ \$	(GST) = \$
Additional Sponsorship:	\$	+ \$	(GST) = \$

**EXHIBITOR PACKAGES** (All entitlements will be assumed and actioned automatically)

**SPACE ONLY**

<input type="checkbox"/> 6m × 3m – \$16,500 + 10% GST	\$	+ \$	(GST) = \$
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**SHELL SCHEME BOOTH**

<input type="checkbox"/> 3m × 3m – \$6,650 + 10% GST	\$	+ \$	(GST) = \$
<input type="checkbox"/> Aspect cafe package OR <input type="checkbox"/> Bar package			

**NFP COUNTER**

<input type="checkbox"/> 2m × 1.5m – \$1,000 + 10% GST	\$	+ \$	(GST) = \$
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**PAYMENT**

TOTAL PAYABLE	\$	(Inc. GST)
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**2019 PASSPORT COMPETITION**

Our organisation would like to participate in the 2019 Passport Competition

**BOOTH/SPACE LOCATION PREFERENCE**

Please provide your 10 most preferred floor/booth space plan numbers (1 being most preferred)

1.	2.	3.	4.	5.
6.	7.	8.	9.	10.



## PAYMENT METHOD

Electronic funds transfer (EFT) into the following bank account:

Bank:	Westpac Banking Corporation, Martin Place, Sydney, Australia
Account Name:	Gastroenterological Society of Australia
BSB:	032 024
Account Number:	396 499
Swift Code:	WPACAU2S

Please ensure the amount transferred is equal to the total due. Include the company name to ensure payments can be matched to the appropriate invoice. To assist in the allocation of your EFT payment, please email remittance advice (which must include your company name) to [accounts@gesa.org.au](mailto:accounts@gesa.org.au).

Credit card payments are welcome.

Please phone GESA on +61 (0)3 9001 0279 to make your credit card payment.

Bookings are not finalised and space will not be allocated until full payment is received.  
Application forms will be returned if they are incomplete.

