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| **ITAC 2020 SPONSORSHIP APPLICATION FORM** |

Please complete form and return with payment to: Corporate Vision Events via email [itac@itacconference.com.au](mailto:itac@itacconference.com.au)

**SPONSORSHIP OPPORTUNITIES**

I/We wish to become a sponsor of the following: *all prices quoted are GST incl.*

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| 🞏 | Aged Care IT Awards Dinner  (3 year package) ***SOLD*** | $30,000 |  |  |  |  |

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| 🞏 | Platinum | $18,000 |  | 🞏 | Silver | $8,000 |
| 🞏 | Gold | $13,000 |  | 🞏 | Bronze | $4,000 |

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| 🞏 | Networking Lounge | $12,000 |  | 🞏 | Keynote Presenter | $4,400 |
| 🞏 | Photography | $10,000 |  | 🞏 | Conference Wi-Fi | $4,400 |
| 🞏 | Juice Bar (stand number 50) | $10,000 |  | 🞏 | Pads & Pens | $3,300 |
| 🞏 | Coffee Cart (No. 1–stand number 45) | $8,000 |  | 🞏 | Breakfast Session (Tuesday) | $3,300 |
| 🞏 | Coffee Cart (No. 2–stand number 31) | $8,000 |  | 🞏 | Breakfast Session (Wednesday) | $3,300 |
| 🞏 | Conference App | $7,000 |  | 🞏 | Lunch (Tuesday) | $2,500 |
| 🞏 | Delegate Satchels | $6,600 |  | 🞏 | Lunch (Wednesday) | $2,500 |
| 🞏 | Ice Cream Cart (stand number 41) | $6,600 |  | 🞏 | Morning Tea (Tuesday | $1,500 |
| 🞏 | Mini Massage | $5,500 |  | 🞏 | Morning Tea (Wednesday) | $1,500 |
| 🞏 | Lanyards | $5,000 |  | 🞏 | Afternoon Tea (Tuesday) | $1,500 |
| 🞏 | Water Bottles | $4,400 |  | 🞏 |  |  |

Program Booklet Advertising

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 🞏 | Outside Back Cover | $1,500 |  | 🞏 | Half Page (4 available) | $990 |
| 🞏 | Inside Front Cover | $1,500 |  | 🞏 | Quarter Page (3 available) | $990 |

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| --- | --- | --- | --- | --- |
| **Included Booth No.** |  | 🞏 3m x 3m | 🞏 2m x 3m | 🞏 1m x 2m pod |
| **TOTAL:** |  | | | |
| **Additional Booth No.** |  | | | |

Will you be providing a custom built stand? 🞎 YES 🞎 NO

If yes, please provide contact details below for who will be managing the process:

|  |  |
| --- | --- |
| Contact Name: | |
| Email: | Phone: |

Please note: 3m x 3m and 2m x 3m booths include 2 tickets to the Awards Dinner and 1m x 2m include 1 ticket to the Awards Dinner.

Details provided below are for the main contact in relation to any communication by the organising office.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name of Company | | | | |
| Contact Person | | Position in Company | | |
| Email | | Website | | |
| Mobile Phone | | Office Phone | | |
| Address | Suburb | | State | Post Code |
| Signature | | Date | | |

🞏 I/we understand that space will be allocated in accordance with date and receipt of application and payment, and that sponsors’ booths will be allocated first. Payments not received within 14 days of receipt of tax invoice will result in the space being made available for resale. Confirmation of the application will be distributed once payment has been received.

**PAYMENT**

🞏 Please send tax invoice for payment **Tax Invoice:** This form becomes a Tax Invoice upon payment. ABN 9916 200 3849

Please return this form and payment to: Corporate Vision Events, GPO Box 1582 Darwin NT 0801

T: 0413 626 021 E: [itac@itacconference.com.au](mailto:itac@itacconference.com.au)

**CREDIT CARD** 🞏 Mastercard 🞏 VISA accepted (please note Amex and Diners Club are not accepted)

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| Credit Card No: | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | | |
| Name on Card: | | Expiry Date: | CVV: |
| Signature: | | Amount: $ | |

**ELECTRONIC FUNDS TRANSFER**

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| --- | --- | --- |
| Account Name:  Bank:  BSB:  Account No: | ITAC Conference  NAB  085 933  94 955 0818 | Reference: Invoice Number  Email remittance to: itac@itacconference.com.au |

Please ensure you state the tax invoice number when lodging EFT funds with the bank and email confirmation to [accounts@itacconference.com.au](mailto:accounts@itacconference.com.au)

|  |  |  |
| --- | --- | --- |
| **ACCOUNTS PAYABLE DETAILS: This is a required field** | | |
| **Accounts Payable Name** |  | |
| **Accounts Payable Phone** |  | |
| **Accounts Payable Email** |  | |
| **Billing Address:** | | **Suburb** |
| **State** | | **Post Code** |

**Terms and Conditions**

**Booking form**All details on the booking form will used as the main point of contact once the complete booking form is received. Please ensure that all details are correct prior to submission. Any updates must be provided in writing to [itac@itacconference.com.au](mailto:itac@itacconference.com.au)

**Disclaimer**

The Organising Committee reserves the right to amend or add any sponsorship package and accept any sponsorship offer, listed or unlisted, at any time and without notice.

**Cancellation Policy**

Once a Booking Form has been received for Sponsorship or Trade Exhibition Opportunities, any cancellation must be advised in writing. If the cancellation is received by 1st November an administration fee of 25% of the total price is retained. If the cancellation is received after 1st November, no refund is applicable.

**Payments**Full payment is required within 14 days of accepted booking. Please ensure your invoice number is used as the reference for all payments.   
 **Provisions**

The Conference Host and Organiser will take all diligent care to fulfil the listed Sponsorship commitments. The Sponsors are responsible for providing all the requirements i.e. banners, promotional material and any other material. The Sponsors are required to make the necessary payment for the Sponsorship within 14 days of the booking. Sponsors are responsible for the security of their own equipment and material whilst at the Conference. Your Sponsorship selection will be confirmed upon receipt of payment. The Host and Organiser reserve the right to alter the Program and/or floor plan if required.

**Remittance Advice**

A remittance advice must be emailed to [itac@itacconference.com.au](mailto:itac@itacconference.com.au). Full payment is required within 14 days of invoice date and received booking confirmation.