

Sponsorship application form

SECTION A: Organisation information

Organisation:

Contact person:

Position:

Address:

Postcode:

Phone (work):

Mobile:

Email:

Website:

Organisation name to be promoted at the conference:

SECTION B: Sponsorship opportunities

Package: (please tick one)

| | |
|--------------------------------------|----------|
| Platinum Sponsor | \$20,000 |
| Gold Sponsor | \$15,000 |
| Silver Sponsor | \$10,000 |
| Bronze Sponsor | \$6,000 |
| Espresso & Networking Lounge Sponsor | \$16,000 |
| Breakfast Briefing Sponsor | \$10,000 |

| | |
|----------------------------------|---------|
| Pen Sponsor | \$4,500 |
| Device Charging Stations Sponsor | \$4,500 |
| Student/Rural/Registrar Sponsor | \$2,500 |
| Conference and Giveaways Sponsor | \$1,500 |

SECTION C: Payment

Direct credit (upon receipt of invoice)

Credit card (upon receipt of online payment portal details)

SECTION D: Payment terms

Full payment is due on the 20th of the month following the date of the invoice. All payments must be received prior to the conference. **PLEASE NOTE:** All prices quoted are in New Zealand dollars excluding GST.

By submitting this application:

I acknowledge on behalf of the sponsor that I have read the College Sponsorship and Exhibition Policy.

The named sponsor agrees to the College's Sponsorship/Exhibition Terms and Conditions and confirms that any activity that it undertakes in respect of the sponsorship/exhibition agreement will comply with the College's Sponsorship and Exhibition Policy.

Please return your completed application form to Rachel Cook: rachel@conference.nz

Signature:

Date:



The Royal New Zealand
College of General Practitioners
Te Whare Tohu Rata o Aotearoa