

BOOKING FORM - SAFETY 2022

Organisation: _____

Contact Name: _____

Position: _____

Postal Address: _____

Phone: _____

Email: _____

SUPPORT PACKAGES		
Type	Cost	Select
Associate Partner	\$50,000	<input type="checkbox"/>
Associate Supporter	\$35,000	<input type="checkbox"/>
Stream Supporter	\$25,000	<input type="checkbox"/>
Conference Dinner Supporter	\$15,000	<input type="checkbox"/>
Poster Presentation Patron	\$10,000	<input type="checkbox"/>
Refreshment Break Supporter	\$8,800	<input type="checkbox"/>
• Monday 28 November		<input type="checkbox"/>
• Tuesday 29 November		<input type="checkbox"/>
• Wednesday 30 November		<input type="checkbox"/>
LMIC Scholarship Supporter	\$5,000	<input type="checkbox"/>
Global Engagement Patron	Contra	<input type="checkbox"/>

EXHIBITION PACKAGES		
Coffee Cart Hub Exhibitor	\$6,600	<input type="checkbox"/>
Students & Young Professionals Meet & Greet Hub Exhibitor	\$4,500	<input type="checkbox"/>
Exhibition Booth	\$4,500	<input type="checkbox"/>
Exhibition Pod	\$3,000	<input type="checkbox"/>

PROGRAM ADS		
Full page program ad	\$700	<input type="checkbox"/>
Half page program ad	\$350	<input type="checkbox"/>
Landing Page on APP	\$2,000	<input type="checkbox"/>
Scrolling Banner on APP	\$1,000	<input type="checkbox"/>

To book a package, please send the completed form to: PHAA Events Team,
E: events@phaa.net.au, T: +61 2 6171 1309

CONFIRMATION

Please note: Upon completion of this form a tax invoice and contract will be provided. Confirmation of supporter, patron and exhibition spaces is conditional upon this form and contract being completed and all payment has been received. The PHAA reserve the right to reassign any supporter, patron or exhibition package if the terms and conditions outlined in the supporter, patron and exhibition brochure are not fulfilled.

Upon confirmation, this contract is binding on the signature below.

I/We agree to comply with the terms and conditions and all provisions of the supporters, patrons and exhibitors contractual obligations all of which I/we acknowledge, have read and understood.

Name of authorised person: _____

Position: _____

Signature: _____

Date: _____

