

SPONSOR & EXHIBITION

BOOKING FORM

2024 LIVESTOCK HANDLING CUP

Contact Name

Position

Organisation

ABN

Postal Address

State

Country

Postcode

Phone

Mobile

Email

APPLICATION

Please tick preferred opportunity (all prices exclusive of GST)

	Price
<input type="checkbox"/> Low Stress Stock Handling School	\$ 15,000
<input type="checkbox"/> Gold sponsor	\$ 10,000
<input type="checkbox"/> Silver sponsor	\$ 5,000
<input type="checkbox"/> Speaker program sponsor	\$ 3,000
<input type="checkbox"/> First Aid sponsor	\$ 1,000
<input type="checkbox"/> Exhibition only	\$ 1,350
<input type="checkbox"/> Breakfast	\$ 500
<input type="checkbox"/> Prize / Sash sponsor	\$ 2,000
<input type="checkbox"/> Satchel sponsor	\$ 2,000
<input type="checkbox"/> Satchel insert	\$ 200

OTHER *(please specify)*

<input type="checkbox"/>		
--------------------------	--	--

PAYMENT SUMMARY

(The balance of payment must be made within 14 days of invoice date)

SPONSORSHIP TOTAL: _____

EXHIBITION BOOTH: _____

TOTAL AMOUNT TO BE INVOICED: _____

TERMS AND CONDITIONS

BY SUBMITTING THIS APPLICATION FORM, YOU (AND ANY COMPANY, ASSOCIATION OR OTHER ENTITY THAT YOU REPRESENT) AGREE TO THE FOLLOWING CONTRACTUAL TERMS AND CONDITIONS:

- IF YOU ARE APPLYING TO BE A SPONSOR OF THIS EVENT, THE SPONSORSHIP TERMS AND CONDITIONS TO BE VIEWED AT THE LINK [HERE](#) ; AND/OR
- IF YOU ARE APPLYING TO BE AN EXHIBITOR, THE EXHIBITOR TERMS AND CONDITIONS TO BE VIEWED AT THE LINK [HERE](#)

PLEASE SIGN AND DATE HERE TO SIGNIFY THAT YOU HAVE READ AND AGREE TO THE APPLICABLE TERMS AND CONDITIONS:

I AGREE ON MY OWN BEHALF, AND ON BEHALF OF THE COMPANY, ASSOCIATION, OR OTHER ENTITY THAT I REPRESENT, AND ON BEHALF OF ALL "RELEVANT PERSONS" AS DEFINED IN THEM, TO THE:

[SPONSORSHIP TERMS AND CONDITIONS](#)*

[EXHIBITOR TERMS AND CONDITIONS](#)*

*[*NOTE – PLEASE TICK THE APPROPRIATE BOX OR BOXES.*

IF YOU ARE APPLYING TO BE BOTH A SPONSOR AND AN EXHIBITOR, INCLUDING IF YOUR SPONSORSHIP PACKAGE INCLUDES EXHIBITION RIGHTS, YOU MUST AGREE TO BOTH SETS OF TERMS AND CONDITIONS, AND TICK BOTH BOXES.]

Signature of applicant

Date

PLEASE SEND YOUR COMPLETED FORM TO KATIE DAWKINS

Email: katie@associatedadvertising.com.au

If you have any questions please contact the conference organiser on +61 8 8942 3388