



Industry Opportunities Booking Form

Booking Reference (EACTS use only)

Please return signed and scanned copy via email to info@eacts.co.uk

Contact Details of Sponsoring Orga	anisation	Invoice Details (Please Complete ALL Fields)		
Main Contact Name:		Company name as it should appear on invoice:		
Company:		Address:		
Address:				
		City:	Code:	
		Country:		
City:	Code:	Person to contact regarding payment:		
Country:		Order Number must be provided:	Telephone:	
Telephone:	Fax:	Email:	Fax:	
Main Contact Email:		*VAT/Tax Number:	N/A	
		*(This field must be completed, if not applic	able please tick the N/A box above)	
Item			Fee	
Techno-College Sponsorship (Thursday 8 – Friday 9 Oct	tober)		
Gold Package (€40,000) Silver Pack	kage (€30,000) Bronze Packa	ge (€18,000)	€	
Video Licence fee (€5,000)			€	
			Total Fees €	
Scientific Sessions Sponsorsh	nip (Thursday 8 – Saturday	y 10 October)		
Sponsor Fees (€15,000) Session Type:		Date /Time:		
71.			€	
Session Type:		Date /Time:	€	
Session Type:		Date /Time:	€	
Comments:			Total Fees €	
			TOTAL FEES C	
Satellite Symposia (Thursday 8	8 & Friday 9 October)			
Band Fees (per slot) Band A Capacity 0-70 (€15,000	D) Band B Capacity 71-150 (€20,000)	Band C Capacity 151-350 (€25,000) Band D	Capacity 351+ (€30,000)	
Title:		Date/Time/Band:	€	
Title:		Date/Time/Band:	€	
Comments:				
			Total Fees €	

TV Studio Recordings (Thursday 8 – Saturday 10 October)				
Fees	(€12,000 per recording)			
Item 1:			€	
Item 2:			€	
		Total Fees	€	
Daily No	ews, Advertising, Brandin	g		
Item 1:			€	
Item 2:			€	
Item 3:			€	
Item 4:			€	
Item 5:			€	
		Total Fees	€	
Meeting	n/Hospitality Room Hire (1	Thursday 8 – Saturday 10 October)		
	Half Day Hire* (€1,500), Full Day Hir	10), Half Day Hire* (€900), Full Day Hire* (€2,000), Full day with 24hr hold* (€3,000), Band B (36-80m²) Peak Hore* (€3,700), Full day with 24hr hold* (€5,000), Band C (81m²+) subject to availability - price on application. Full day (0800-1600 or 0900-1700); Peak hours (1230-1400)		
Title/Descrip	tion/Purpose of Event:	Date /Time:	€	
Title/Descrip	tion/Purpose of Event:	Date /Time:	€	
Title/Descrip	tion/Purpose of Event:	Date /Time:	€	
		Total Fees	€	
Bookings w Confirmation An invoice On signing	on of space will be made once the bo for the full amount of the room hire this form, you are confirming that yo	u have read and agree to the cancellation terms and conditions on the EACTS website . Sifer within 7 days of the date of the invoice otherwise the booking will be released.		
Agreemen The unders		greements on behalf of the sponsoring organisation in respect of the above booking.		
Name:		Signature: Please complete and return this the FACTS Executive Secret		
Position:		Date: the EACTS Executive Secretary email to info@eacts.co.uk	апат by	