

## EXHIBITOR, SPONSOR, & ADVERTISEMENT APPLICATION & REGISTRATION FORM

Company/Organization.....

Contact Person .....

Postal Code .....

City .....

Country .....

Phone.....

Fax .....

Email .....

Website .....

RESERVATION	COST	QUANTITY	AMOUNT
Platinum (exhibition area 12 m <sup>2</sup> )	KSH 750,000		
Gold (exhibition area 8 m <sup>2</sup> )	KSH 500,000		
Silver (exhibition area 8 m <sup>2</sup> )	KSH 350,000		
Exhibitor (exhibition area 6 m <sup>2</sup> )	KSH 100,000		

### **Sponsorship of Particular Events or Programme Items**

The event/item of choice will be officially named after the sponsor (e.g. "XY Lecture", "XY Dinner", etc.

ITEM	COST	COMPANY	AMOUNT
Cocktail satellite symposium	KSH 750,000		
Conference dinner	KSH 750,000		
Workshop	KSH 200,000		
Conference bags with the sponsor logo	KSH 450,000		
Badges	KSH 30,000		
Certificates	KSH 20,000		
Program Book Inside Cover	KSH 20,000		

**PROPERTY RESPONSIBILITY/INSURANCE:**

Much as KSA will make every effort possible to ensure adequate security, you are responsible for insuring the safety of your personnel and your exhibit materials from theft, damage, accident, fire and other such causes. Exhibitors who desire to carry insurance must do so at their own expense. All property of the exhibitors is understood to remain in their own care, custody and control in transit to and from the confines of the exhibit area, as well as while it is on the floor. Security and storage space will not be provided.

**Cancellation**

An exhibitor may cancel or withdraw from the meeting, subject to the following conditions:

- Cancellation must be in writing.
- For cancellation on or before 29<sup>th</sup> February 2017 the exhibit fee will be refunded.
- For cancellation from 31<sup>st</sup> March 2017 a cancellation fee of 25% will be incurred by the vendor.
- No refunds for cancellations after 30<sup>th</sup> April 2017

KSA is not responsible for losses incurred, theft or damage to materials. *The items and fees in this catalog are subject to change without prior notice, if necessary.*

**Method of Payment:**

**Bank Transfer:**

Bank charges are the responsibility of the sponsor/ exhibitor.

Bank	Standard Chartered
Account Name	Kenya Society of Anaesthesiologists
Account Number	01028-474550-00
Branch	Yaya Centre
Swift Code	SCBLKENXXXX

SIGNATURE: ..... DATE: .....

COMPANY STAMP: .....

Please e-mail to [admin@anaesthesiakenya.co.ke](mailto:admin@anaesthesiakenya.co.ke)

**Kindly submit this form with your company logo and 100 words or less company profile.**

**CONGRESS SECRETARIAT**

Kenya Society of Anaesthesiologists  
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Kenya Medical Association Center, SUITE 406, Wing C,  
Mara Road, Nairobi.

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Website: [www.anaesthesiakenya.co.ke](http://www.anaesthesiakenya.co.ke) E-mail: [admin@anaesthesiakenya.co.ke](mailto:admin@anaesthesiakenya.co.ke)