



**AUSTRALIAN RESUSCITATION  
COUNCIL**

**7<sup>th</sup> INTERNATIONAL SPARK OF LIFE CONFERENCE**

**30 APRIL - 2 MAY 2009**

**SPONSORSHIP CATEGORIES  
AND TRADE EXHIBITION**

# SPONSORSHIP CATEGORIES

## ***PRINCIPAL SPONSOR (ONE ONLY)***

**\$45,000 (Inc of GST)**

### Benefits:

1. Title of "Principle Sponsor"
2. Named Conference session (to be negotiated with conference organising committee)
3. Announcement of status during Conference.
4. Acknowledgment of status in program and logo on program book.
5. Three trade booths in preferred position plus trade registrations up to 8.
6. Free satchel inserts.
7. Full page advertisement in printed program either in the booklet or back cover.

## ***MAJOR SPONSORS***

**\$25,000 (Inc GST)**

### Benefits:

1. Title of "Major Sponsor".
2. Announcement of status during Conference.
3. Acknowledgment of status in program and logo on program book.
4. Two trade booths in preferred position plus 4 trade registrations.
5. Free satchel inserts.
6. Free advertisement in printed program.

## ***SPONSORS***

**\$6,500 (Inc GST)**

### Benefits:

1. Title of sponsor.
2. Acknowledgment of status in printed program.
3. Trade display plus 2 trade registrations.

## ***SUPPORTERS***

**\$1,000 (Inc GST)**

### Benefits:

1. Title of supporter.
2. Acknowledgment of status in printed program.

## ***DINNER SPONSOR (One only)***

If interested, arrangements and cost can be discussed with the Conference Organising Committee.

EXPRESSION OF INTEREST TO BECOME A SPONSOR

7<sup>th</sup> INTERNATIONAL SPARK OF LIFE CONFERENCE 30 APRIL-2 MAY 2009

- PRINCIPAL SPONSOR (one only) \$45,000 (Inc GST)
- MAJOR SPONSOR \$25,000 (Inc GST)
- SPONSOR \$6,500 (Inc GST)
- SUPPORTER \$1,000 (Inc GST)
- DINNER SPONSOR (To be negotiated)

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PLEASE PRINT COMPANY NAME

Company Contact .....  
PLEASE PRINT

Tel: .....

Email: .....

**PAYMENT: 50% of sponsorship fee due and payable by 30<sup>th</sup> June 2008  
Balance due 31<sup>st</sup> December 2008**

**Please return to: Mrs Carol Carey, Conference Convenor, 7<sup>th</sup> Spark of Life Conference,  
Australian Resuscitation Council,  
C/- Royal Australasian College of Surgeons, Spring Street,  
MELBOURNE, VIC. 3000**

**SPARK OF LIFE CONFERENCE 30 APRIL-2 MAY 2009**

**TRADE EXHIBITION DETAILS APPLICATION TO EXHIBIT AND  
REGISTRATION FORM/TAX INVOICE**

**VENUE:** Hotel Grand Chancellor - Hobart

**EXHIBITORS IN:** Thursday 30<sup>th</sup> April 2009 from 1400 hrs.

**EXHIBITORS OUT:** Saturday 2<sup>nd</sup> May 2009 after 1600 hrs.

**BOOTH DETAILS:**

Booths:	3.0m x 2.1m
Walls:	Fronrunner covered panels 2.4m high (velcro compatible fabric)
Fascia:	Fronrunner covered 300mm deep (velcro compatible fabric)
Sign:	Mounted on fascia 1800mm long x 200mm high Computer cut vinyl lettering on corflute (max. 26 characters) in choice of primary colours One sign per booth
Lighting:	2x150 watt spotlights per booth Mounted on light track inside fascia
Power:	1x240 volts/1000 watt/4amp general purpose outlet per booth, regardless of size.

**Further Booth details from assembler:** Mr Kevin Lyons, Salters Hire  
24 Tasma Street, Nth Hobart, Tas 7000  
[hire@salters.com.au](mailto:hire@salters.com.au)

**COST:** \$3,850 per booth (Inc GST)  
Includes 1 x trade representative registration.  
Up to two (2) extra reps @ \$200 (Inc GST)

***OBLIGATIONS OF COMMITTEE:***

The Committee will only provide what is indicated above and the exhibitor must at his own expense, equip his booth with such fixtures as furniture etc. as may be necessary for this exhibit.

***LIABILITY:***

The Australian Resuscitation Council will not be liable for injuries to any person or damages to property owned or controlled by exhibitors. The exhibitor must insure itself, at its own expense against property loss or damage, and against liability of personal injury and liability for property damage.

APPLICATION TO EXHIBIT

7<sup>th</sup> INTERNATIONAL SPARK OF LIFE CONFERENCE 30 APRIL-2 MAY 2009

I / We prefer booth locations on the enclosed floor plan in order of preference:

1<sup>st</sup> preference No.....      2<sup>nd</sup> preference No.....      3<sup>rd</sup> preference No.....

but I / We accept the convenor's decision on location as final. I / We request the Exhibiting Company to be listed in the program as follows:

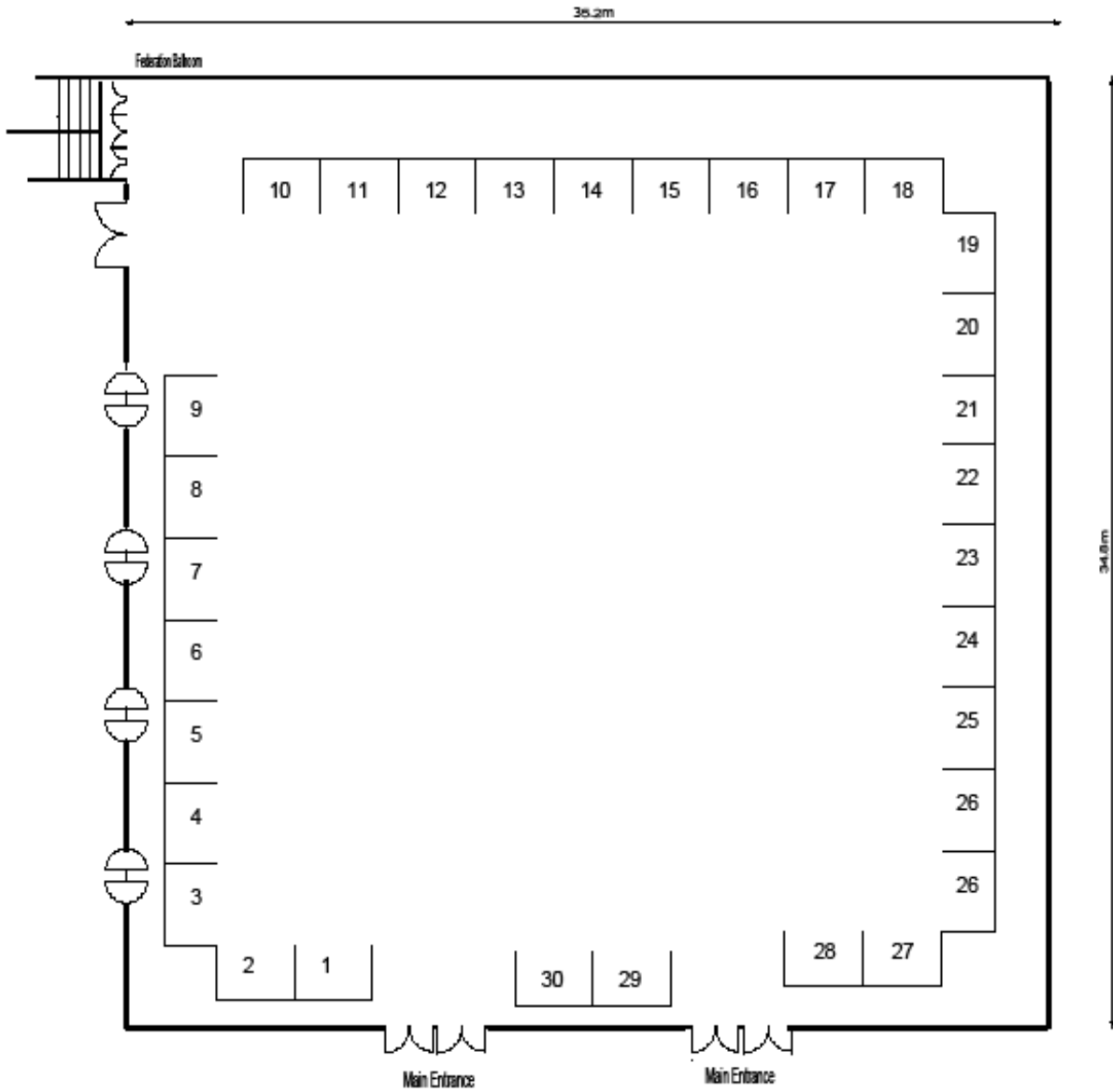
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PLEASE PRINT

Rental is agreed at \$3,850.00 (Incl of GST) per erected booth for the period of the meeting. Please return this form together with a copy of the enclosed tax invoice and your full payment to the address below. Booths will be allocated on a first paid basis.

Please return to:      Mrs Carol Carey, Conference Convenor, 7<sup>th</sup> Spark of Life Conference,  
Australian Resuscitation Council,  
C/- Royal Australasian College of Surgeons, Spring Street,  
MELBOURNE, VIC. 3000

# SOL CONFERENCE 2009



Plan Specifications  
30 BOOTHS 3M X 2M

**Salters Hire**  
Date Drawn 30/01/08



**AUSTRALIAN RESUSCITATION COUNCIL**

C/- Royal Australasian College of Surgeons Spring Street, Melbourne, Vic 3000  
Tel: (03) 9249 1214 - Fax: (03) 9249 1216 - Email: [carol.carey@surgeons.org](mailto:carol.carey@surgeons.org)

**TAX INVOICE**

**ABN NO. 73 708 281 962**

**TRADE EXHIBITION REGISTRATION FORM**

**2009 SPARK OF LIFE CONFERENCE**

COMPANY NAME: .....

ADDRESS: .....

.....POSTCODE.....

SIGNED: ..... STATUS: .....

No. of Trade Booths required  @ \$3,850 per booth = \$  
(Incl of 10% GST)

No. of Trade representatives attending  (1<sup>st</sup> rep free)

Additional reps \$200 each (up to 2)  @ \$200 per head = \$  
(Incl of 10% GST)

**Sub Total:** \$

Conference Dinner No. attending  @ \$110.00 per head \$  
(Friday 1<sup>st</sup> May 2009 7.30 for 8pm) (Incl of 10% GST)

**TOTAL:** \_\_\_\_\_

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Welcoming Cocktail Party No. attending  No charge  
(Thursday 30<sup>th</sup> April 2009 6-8pm)

**PAYMENT OPTIONS**

- 1. Please make your Cheques payable in AUSTRALIAN Dollars to "Spark of Life Conference".
- 2. The following credit cards are acceptable and complete details required.

Bankcard  MasterCard  Visa  AMEX  Diners Expiry Date  Month  Year

CARD NO.

.....  
CARDHOLDERS' NAME - BLOCK LETTERS      CARDHOLDER'S SIGNATURE      DATE