



PARTNERSHIP ORDER FORM

To be sent back to:

Maria DOBROGOST
EUROPA ORGANISATION
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Fax: +33 561 420 009

COMPANY DETAILS

SOCIETY:
(this corporate name will be used on communication media)

CONTACT: Mr. / Mrs.

First Name / NAME:

Address:

.....

Postal Code: City: Country:

Function: Email:

Direct phone: Cell phone:

INVOICING DETAILS

VAT Nr., TIN or Tax registration Nr. (compulsory):

Purchase order Nr. (if necessary):

Name of the invoicing society:

.....

Invoicing address (if different):

.....

Postal code: City: Country:

Account department contact (full name):

.....

Phone: Email:

SELECT YOUR SPONSORSHIP PACKAGE

1. EXHIBITION LEVELS (excl. VAT)

- Gold** €4,500
- Silver** €3,500
- Bronze** €2,500

Surface area : _____ m ²
Total 1 : _____ € Excluding VAT

NB: Sponsors register separately from regular conference attendees
via the form on <http://evolutionmontpellier2018.org/partnership-file-registration>

2. EXHIBITOR OPTIONS

NB: Exhibitors register separately from regular conference attendees via the form on
<http://evolutionmontpellier2018.org/partnership-file-registration>

- Large exhibition booth – 12sqm € 900
- Standard exhibition booth – 9sqm € 675
- Simple exhibition area– approx. 6sqm..... € 350

Surface area : _____ m ²
Total 2 : _____ € Excluding VAT

3. Advertising

Final programme advertising

- Outside back cover..... €1,500 (excl. VAT)
- Inside front cover €1,000 (excl. VAT)
- Inside back cover €1,000 (excl. VAT)
- Inside page € 750 (excl. VAT)
- Half page € 500 (excl. VAT)

Total 3 : _____ €
Excluding VAT

4. Other advertising opportunities

- Poster Sessions €1,500 per session
- Leaflet (synoptic programme) € 3,000
- Conference badge lanyards (exclusivity) € 4,000
- Flyers (quantity required: 2,500) € 1,000
- Charli Original € 350
- Charli Play..... € 420
- Pads and Pens (exclusivity) € 3,000
- Coffee Break € 1,500 per break
- Conference dinner (exclusivity) quotation available on demand

Total 4 : _____ €
Excluding VAT

AMOUNT

Total amount VAT excluded = _____ €

VAT 20 % (if applicable) = _____ €

Deposit 50% = _____ €

Total amount VAT included = _____ €

PAYMENT CONDITIONS

- A 50% deposit must be sent together with your order.
- No cancellation will be accepted after the order has been received.
- No refunds will be made. The balance payments must be proceeded by **June 19, 2018**. Cheques must be made payable to EUROPA GROUP. For payments by bank transfer, please use the below bank account details. Applications without the 50% deposit will not be processed.
- An invoice with VAT details will be sent to you ASAP.
- Exhibitors who have not made the final payment will not have access to the exhibition.
- If you need an invoice to make the payment of the deposit, please tick the following box
- If you need a quotation to make the payment of the deposit, please tick the following box

PAYMENT MODE

By cheque: Payments by cheque must be ordered to EUROPA GROUP / Joint Congress on Evolutionary Biology 2018

Amount = _____ n°: _____ drawn on _____

By bank transfer: Payments by bank transfer must be made directly to the account of Europa Group. Please indicate the name of the event and your company name (bank charges must be paid by you).

Code Banque	Code Guichet	N° de compte	Clé RIB	Code SWIFT	Domiciliation	Code IBAN
30056	00350	03502062435	38	CCFRFRPP	HSBC FR BBC OCCITANIE	FR 76 3005 6003 5003 5020 6243 538

Bank transfer wired by « name of the bank » _____ Date: _____
(Please send us the transfer notification)

An invoice will be sent to you after your application and the reception of your deposit.
The signature of the order form implies acceptance of the general terms and conditions of exhibition and partnership, as well as the cancellation policy and general terms of insurance (written in the partnership file)

By credit card: the undersigned Mr. / Mrs.
authorizes EUROPA GROUP to charge the amount of € on my credit card:

Visa Mastercard

Nr.

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(1) Cryptogram

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Date of validity (mandatory)

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 /

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Month Year

(1) This cryptogram represents the last three figures of the visual cryptogram on the back of the credit card

Signature of the card holder

I,..... (name), hereby certify that I have read and acknowledge the rules and protocols for participating in the Joint Congress on Evolutionary Biology 2018

Date

Signature and company stamp: