



**Booking form ilegx initiative**

**Company Information**

Contact Name .....  
 Company Name .....  
 Address .....  
 City ..... Post Code ..... Country .....  
 Email: .....  
 Telephone ..... Fax .....

**I would like to sponsor ilegx on behalf of the above company.**

**Sponsorship**

**Interdisciplinary Education:** **£20,000**

Major Sponsorship at ilegx annual meeting March 9-10, 2011 ExCeL Centre, London , UK (12sqm booth and one hour satellite symposium, 5 sponsored delegates and bag insert)

**Plus:** Joint one hour Symposium at existing meeting (custom-made interdisciplinary programme up to 4 speakers from at least 3 medical specialties ilegx sponsors faculty travel, accommodation & honoraria)

**Community Education:** **Price on application**

(Custom-made programmes to improve referral skills)

**Implementation:** **Price on application**

(Custom-made Habits & Practices Research as well as individual Change Programmes)

**Annual Meeting**

**Major Sponsorship:** **£10,000**

Major Sponsorship at ilegx annual meeting March 9-10, 2011 ExCeL Centre, London , UK (12sqm booth and one hour satellite symposium, 5 sponsored delegates and bag insert)

**Education Sponsorship:** **£5,000**

(6 sqm stand and 5 sponsored delegates)

**Innovation Sponsorship:** **£2,500**

(6 sqm stand)

**Sponsored Talk:** **£1,000**

(10 min talk in scientific programme, only available in conjunction with a stand)

\*Each option includes 5 complimentary company personnel registrations.

All prices are subject to VAT @ 15%. This will be added to your invoice

Please specify stand number ..... Total sponsorship cost .....

**An invoice for 50% deposit will be issued to you by the end of November 2010.**

**Terms and conditions:**

1. Cancellations after booking will be subject to a charge of 20% of cost.
2. Cancellations after February 1st 2011 will be subject to payment of the full charge
3. Five complimentary company personnel registrations and entrance to the social event on Tuesday evening are included in above fees.
4. Any additional personnel attending your stand will be required to register at £150.
5. The auditorium and the exhibition hall are directly linked. Company personnel has access to all lectures.

**I agree to the above terms and conditions**

**Complete and return**

Please complete and return this form to:  
 Marianne Boulakas, BIBA Medical Limited, 44 Burlington Road  
 London SW6 4NX.  
 Telephone: +44 (0) 20 7736 8788 Fax: +44 (0) 20 7736 8283  
 email: nathalie@bibamedical.com  
 web: www.ilegx.com

Signature ..... Print name ..... Date .....