

**Application to Sponsor**

**Title (Prof/Dr/Mr/Mrs/Ms)** **First Name** **Last Name**

**Organisation** **Business Type**

**Address (street name and suburb)**

**State** **Country** **Post** **Code**

**Telephone** **Fax** **Mobile**

**Email** **Website**



**Please complete and return this form to:**

Contact: John Dcoutho

Mobile: 0424660500

Email: [ieee@swin.edu.au](mailto:ieee@swin.edu.au)

**Advertising:**

Inside Back Cover

Full Page

Half Page

Web Advertisement

**Please select your sponsorship category:**

Platinum

Gold

Silver

Bronze

**Further sponsorship opportunities:**

Lunch Sponsorship

Coffee

Welcome

Lanyard

Bag Sponsor

Exhibitor

Text

Description automatically generated with medium confidenceLogo, company name

Description automatically generated

Payment methods:

1. Electronic Funds Transfer

Bank: Commonwealth Bank of Australia

Acct name: The Victorian Section Conference  
 BSB: 063 143

Account number: 1046 9906

Swift Code: CTBAAU2S

1. Credit Card

Card holders full name (as on the card) Expiry /

Card number Signature

### DECLARATION

* I declare that I am the authorized person to complete this form on behalf of my organization.
* I have read the terms and conditions, understand the entitlements offered, and agree to be invoiced for the total amount of the items selected above. TOTAL AUD

Signature Date