Event Sponsorship APPLICATION

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| EVENT | FPM Annual Symposium 2020 |
| DATE | Thursday 26 – Friday 27 November 2020 |
| VENUE | Online |
| AUDIENCE DETAILS | 1500+ via email list, 4000+ social followers, 200+ delegates estimated at the event. Mostly FPM members i.e. pharmaceutical physicians plus other healthcare professions, pharmaceutical scientists, patient organisations. |
| PACKAGE DETAILS  | Brand placement via all FPM’s digital channels.  |
| PRICE | £650 |

**The Faculty of Pharmaceutical Medicine (FPM) is not registered for VAT.**

**Please note:** all applications will be considered on a first come basis and will be subject to a process of due diligence. FPM is not able to accept bookings from organisations that it does not consider to be aligned with its values and charitable objects whether directly or indirectly.

# **Sponsor DETAILS (please complete)**

|  |  |
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| ORGANISATION NAME:   |  |
| ORGANISATION’S SECTOR OR INDUSTRY: |  |
| REGISTRATION DETAILS:(i.e. company, charity) |  |

Terms and Conditions

By signing this application form the organisation agrees if accepted as a sponsor:

* to comply with any sponsor requirements issued by the Faculty of Pharmaceutical Medicine (FPM) or the platform hosting our event,
* not to conduct any direct sales during the event without prior permission,
* not to use the name, image or logo of FPM or the venue hosting our event for any purpose that might imply endorsement unless prior permission has been obtained to do so,
* to pay upon invoice the full balance payments. No refund will be possible unless the event is cancelled by FPM.
* if the event is cancelled by FPM a refund of the charges already paid directly to FPM will be made but any other related costs incurred by the organisation will not be refunded.

**Please note:**

* FPM may record the event for public use. If you object to any images of your branding or your representatives being used in the way please let us know.
* Delegate number estimates are not guaranteed and the event programme, timings, speakers and venue may change.
* Do not consider this request booked until you have received written confirmation from FPM.

Please ensure that you have authority to sign this form on behalf of your organisation.

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| --- | --- |
| CONTACT NAME & DETAILS: |  |
| SIGNATURE: |  | **DATE:**  |

Please return this completed form to events@fpm.org.uk

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