#

# Binding Order Form

# 39th Scandinavian Congress of Rheumatology.

**Copenhagen, Denmark**

**The invoices for the exhibition space and sponsorships are to be issued to the company name and address mentioned below. Please make sure to provide correct invoicing information.**

|  |
| --- |
| Company: CSL  |
| Contact person:  | Job Title: |
| Attention on invoice (if different from contact): | Address: |
| Postal code: | City:  |
| Country:  | Telephone:  |
| Company VAT # (required): | E-mail: |
| Remarks (eg. PO number on invoice): |  |

|  |
| --- |
| We would like to book the following items |
| **Sponsorship item** | **Price excl. VAT** | **Select here**  |
| Exhibition / Bronze Sponsor booth\* | **DKK 4.500 per m2 (min. 6 m2)**Preferred size: | Please indicate number of sqm: \_\_\_\_\_\_m2 X DKK 4.500 = **DKK \_\_\_\_\_\_\_\_\_\_** |
| Additional Exhibitor passes | **Per person: DKK 1.500** |  |
|  |  |  |
| Silver Sponsorship | **DKK 150.000** |  |
| Gold Sponsorship | **DKK 400.000** |  |
| Platinum Sponsorship | **DKK 600.000** |  |
| Outside Back Cover | **DKK 15.000** |  |
| Inside Back Cover | **DKK 12.000** |  |
| Full Page Advertisement, internal | **DKK 9.000** |  |
| Half Page Advertisement, internal | **DKK 7.500** |  |
| Congress Bags | **DKK 15.000** |  |
|  |  |  |
| **Total amount**  |  | **DKK**  |

Terms and specification are included in the sponsor and exhibitor invitation document.

By signing, I declare that I agree with the General Terms and Conditions as stated in the Sponsor & Exhibitor Invitation.

All order forms will be processed in the order in which the Organizer receives them.

We confirm that invoices for the exhibition space and sponsorships should be issued in the name of above-mentioned company and sent to above mentioned address.

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

This form should be e-mailed to: MCI Copenhagen A/S: **scr2023@wearemci.com**