

Sponsorship and Exhibition Booking Application Form

Thank you for expressing your interest to Sponsor/Exhibit at the Global Health Security Conference 2026. In order to secure your sponsorship, we require the following form to be filled in with your selection and payment details. Please return the form to exec@ghsconf.com

Organisation Name:				
Organisation Address:				
City:	Postal/Zip Code:			
City.	Postal/Zip code.			
State:	Website:			
Main Exhibitor/Sponsor Contact				
Title:	Name:			
Position:	Contact Number:			
Email:				
Sponsorship Package(s)				
Please note the sponsorship package/s you would like to request.				
Package Requested	Cost \$AUD			
1.				
2.				
2				
3.				

Credit Card Authorisation

Invoicing Details

To secure the booking, the credit card authorisation below must be completed.



This Authorisation form will only be used as a guarantee for any payments that are past due including any cancellation fees. At all times you will be notified in advance by the contact details listed above before charging to the card.

Any credit/debit card transaction fees will be charged to the exhibitor/sponsor at an additional cost to the package prices.

	AMEX	☐ Maste	rcard	□ Visa		
Credit card number: / / /						
Expir	y date: /					
CCV:						
Nam	e on the card:					
Signa	ature:					
Date	://					
Please note all payments are to be made by Bank/Wire transfers at this time.						
<u>Term</u>	s and Conditions					
To complete the booking, you must agree to the GHS2026 Sponsorship and Exhibitor Terms and Conditions (these can be found at the back of the S&E Prospectus.)						
	Yes I have read and agree to	the booking	terms and conditions	for GHS2026		
Autho	orized by:					
Date:						
Signa	ture:					