



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@ghsn.org

Invoicing Details

Organisation Name:

Organisation Address:

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.		
3.		

Credit Card Authorisation

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**

☐ **Mastercard**

☐ **Visa**

Credit card number: ____ / ____ / ____ / ____

Expiry date: __ / __

CCV: ____

Name on the card: _____

Signature: _____

Date: __ / __ / ____

Please note all payments are to be made by Bank/Wire transfers at this time.

Terms 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

Authorized by: _____

Date: _____

Signature: _____