

RANZCO QUEENSLAND BRANCH ANNUAL SCIENTIFIC MEETING

SHERATON GRAND MIRAGE RESORT, GOLD COAST

2-3 AUGUST 2019



www.QRANZCO2019.com

Glaucoma
The Science, the Art, the Practice

SPONSOR / EXHIBITOR INFORMATION KIT

Conference  **Link**
Conference & Event Management

RANZCO  The Royal Australian
and New Zealand
College of Ophthalmologists
THE LEADERS IN COLLABORATIVE EYE CARE

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IMPORTANT DATES AND DEADLINES

Include with booking	Sponsors: Logo – eps & jpeg format
Monday, April 8	Booth allocations commence
Friday, July 19	Exhibitor registrations due
Thursday, August 1	Satchel Inserts to be at Sheraton Grand Mirage, Gold Coast by 10am
Thursday, August 1	Exhibition booth build
Thursday, August 1	Exhibitor Bump-In from 3.00pm
Friday, August 2	Exhibition Open 7:30am – 7:00pm
Friday, August 2	Networking Function in Exhibition area 5:00pm – 7:00pm
Saturday, August 3	Exhibition Open 8:00am - 2:50pm
Saturday, August 3	Exhibitor Bump-out after 3:00pm (No pallets or travel crates)
Saturday, August 3	Equipment and stand dismantle <u>strictly</u> 4:30pm – 10pm

GENERAL EXHIBITION INFORMATION

ACCOMMODATION

A block booking has been made at Sheraton Grand Mirage Resort, Main Beach, Gold Coast.

Accommodation is limited: all attempts to provide room preferences will be made however they are not guaranteed.

Room allocations will be made on a first-come basis. Reserved rooms will only be held until 6pm on the day of arrival unless prior notice is given by indicating a later arrival time on the registration form, or by contacting the hotel direct.

Full payment is required to secure your booking. Rooms cancelled will be subject to the hotel's policy.

Room prices are GST inclusive. See forms at back of booklet.

BOOTH ALLOCATIONS

Booths will be allocated from the 8th of April 2019. Booths will be allocated in order of level of sponsorship.

Sponsorship Partner then Major Sponsor then Key Sponsor followed by exhibitors in the order Conference Link received booking forms and payment.

BOOTH FIXINGS

Please bring your own shrink wrap, tape etc as none are included in the booth prices.

BOOTH and inclusions

These will be standard 3m x 3m system style booths 2.5high constructed with white PVC inserts in an aluminium frame.

Each booth consists of the following items:

3.0m wide x 2.5m high back walls

2.5m deep x 2.5m high side walls on closed sides

290mm high fascia on open sides

1 x company signage on open sides (up to 30 white characters on white pvc panel)

2 x energy efficient spotlights

1 x 4amp general-purpose outlet (GPO)

All furniture and equipment is to remain inside your designated space at all times.

Booths are shell only (including signage) any other furniture must be arranged separately. (Table and chairs are not included)

CANCELLATION POLICY & DISCLAIMER

Your cancellation must be advised in writing and will be processed in accordance with the below.

Days from Arrival Date	Date	Cancellation Policy
>61 days from arrival	June 1 st 2019	75% of Sponsorship and / or Exhibition costs refunded
60 – 31 days from arrival	July 4 th 2019	50% of Sponsorship and / or Exhibition costs refunded
30 – 15 days from arrival	July 18 th 2019	25% of Sponsorship and / or Exhibition cost refunded
<14 days from arrival	July 19 th 2019	No refunds given

If cancellation occurs, refunds will be actioned after the conference. If booth or product is resold a refund will be given less a \$200 administration charge.

Staff: Cancellations received in writing before July 19, will attract a \$125 administration charge and there will be no refunds after that time.

CEILING HEIGHT

Terrace Foyer – 3.45m

Mirage Grand Ballroom 1 & 2 – 5.5m

CONFERENCE LOCATION

Sheraton Grand Mirage Resort

71 Seaworld Drive

Main Beach QLD 4217 Gold Coast

(Approx 30mins from Coolangatta airport & 60mins from Brisbane airport)

CUSTOM STANDS

If the standard shell scheme is not required and a custom designed stand is to be constructed, please contact [Pyramid Displays](#) and advise details of your stand and to arrange a time for your contractor to start work.

Please pass on the Exhibition Information to your booth contractor as there is important information in it that they must adhere to.

Any outside contractor you use on-site must conform to the hotel's relevant OH & S, insurance and any other requirements.

You may not share or sub-let any part of the booth space without prior approval. You will be responsible for any costs to repair the booth or room if you mark or damage any fixture or fitting.

Custom Stand designs must be advised no later than 6 weeks prior to the conference. A copy of the design is to be sent to Conference Link.

DELIVERY AND COLLECTION OF GOODS

Please note that the Hotel accepts deliveries 24 hours prior (Wednesday 2) to bump-in day unless prior arrangements have been made. They can hold for 24 hours after unless other arrangements are made.

The Hotel accepts no responsibility for any items delivered or left for collection.

Template for delivery address is at the end of this booklet (Page 16)

DISCLAIMER

The information contained in this Prospectus is correct at the time of going to print. The Scientific Committee and organisers reserve the right to change without notice any part of the program, the set-up or speakers. Updates prior to the conference will be published on RANZCO website, but it is the responsibility of exhibitors to check with the event organiser regarding arrangements at the time of the conference.

EXHIBITION BOOTH BUILD & EXHIBITOR BUMP IN

Thursday, August 1

If you have a custom-built stand, please contact Pyramid Displays to arrange a time for your contractor to build.

Exhibitors will have access to dress their booths from 3.00pm Thursday and must be completed by 7pm.

EXHIBITION BREAK-DOWN

Saturday, August 3

All exhibits must remain intact until after the afternoon tea break on Saturday. Exhibitors can pack up the booth after this time, but the booths cannot be dismantled until 4:30pm. As the conference will continue we cannot have the noise of dismantling booths until after this time.

The packing down of your goods must be confined to within your stand.

Crates, pallets, travel cases and packing boxes cannot be used until after 4:30pm.

You must leave the walkways clear.

Please advise any outside contractors or persons picking-up boxes etc not to arrive until after 5.00pm.

EXHIBITION CONTRACTOR

The official contractor for this event is: **Pyramid Displays**

Once a booth is confirmed, Mick Antunovic from Pyramid Displays will provide you with a catalogue of fittings, plants etc for the decorating of your booth.

Mick Antunovic

Pyramid Displays

5 Ern Harley Drive Burleigh Heads QLD 4220

Ph: (07) 55 22 11 33 / Fax: (07) 55 22 07 44

E-mail: info@pyramiddisplays.com.au Web site: www.pyramiddisplays.com.au

EXHIBITION LOCATION

Grand Mirage Ballrooms 1 & 2 - Sheraton Grand Mirage Resort

71 Seaworld Drive, Main Beach, QLD 4217

EXHIBITOR STAFF REGISTRATIONS

DEADLINE: July 19

All staff attending **MUST** be registered. Your application to sponsor or exhibit does not constitute an attendee registration – forms for registering each staff member are at the back of this booklet. (from page 8)

In order for us to print badges, catering etc we need the names of all staff who will be attending (complimentary or paid) by this date.

You are not permitted to invite outside contacts or colleagues to your booth unless they are registered to attend. There are a number of places close by if you wish to have a meeting or catch up.

Generic Staff badges can be an option if you are unsure who will be attending on a certain day. There will be no special dietary requirements, replacement badges will not be issued, badges will be issued daily.

Additional Personnel, above that which is included in the booth, must register at the fees below.

2-day Registration \$375

1-day Registration \$225

(Prices do not include the additional meetings or Networking Function)

Staff can register for 1 day or for the full conference. There will be no ½ day shuffles with staff badges. Full registrations cannot be shared as day registrations are available.

FINANCE

All prices are in Australian dollars and include GST.

You will be issued a tax invoice on receipt of booking form. This invoice is payable within 14 days.

If you pay by electronic transfer or an International cheque, you agree to pay any bank charges and must include these in the amount you transfer.

HOTEL CONTACT DETAILS

Natalie Allen

Catering & Events Manager Sheraton Grand Mirage Resort Gold Coast

t — 61 7 5591 0975 f — 61 7 5577 2299

EMAIL ADDRESS Natalie.allen@sheraton.com

LIABILITY

Each exhibitor must make provisions for the safeguarding of their goods, materials, equipment and personnel at all times. The committee and organisers cannot be held responsible for property damage or loss for any cause.

LOGO

DEADLINE: with booking

Your Logo may be required for inclusion on the Website, Registration Brochure, Power-point slide, Handbook etc . Logos and/or company names will be reproduced in the event colour/s, full colour, or mono, at our discretion. All logos must be at least 300 DPI at 100% in EPS (preferred for print) and JPEG (preferred for website) format. No print or web recognition will be given unless payment terms have been met.

MEALS FOR EXHIBITORS

Morning & Afternoon teas will be served 10 mins prior to delegate breaks. Lunch may be taken 20 minutes prior to the delegate break. The hotel staff will direct you to the open buffet. Catering is available only to registered delegates and registered exhibition staff.

MORE EXHIBITOR INFORMATION

If you are in need of additional information or need assistance in completing the enclosed application form, please contact:

Ty Fleming - Conference Link

Ph: 07 3851 4298 Fax: 07 3851 1427 Email: tdf@conferencelink.com.au

OUTSIDE CONTRACTORS

i.e: Barista, caricaturist, massage therapists etc.

A daily fee of \$98.00 per person will be charged to the employing company to cover meals and associated costs.

The area must be kept clean at all times and must be contained within the booth area purchased.

Catering - Provision of Food and Beverage

Under NO circumstances are exhibitors permitted to provide food and/ or beverage in their stand unless it is provided by the Hotel.

All catering requirements for booths can be arranged with the Hotel Event Co-ordinator prior to the exhibition.

PRIVACY STATEMENT

Your name and contact information, including electronic address, may be used by parties directly related to the event such as the organisers and approved stakeholders, for relevant purposes such as promotion, networking, and the administration of this event and future events of this type. If you do not consent, please advise us. In addition, your name, organisation and country/state of origin may be published on the delegate list which is provided to delegates, exhibitors and sponsors at the event. If you do not wish your details to be included in this list, please contact us.

PROGRAM

Details of speakers and program may change without notice. The conference website will have the latest information. Visit www.granzco2019.com

SACHEL INSERTS

Thursday, August 1

Inserts must be received at Sheraton Grand Mirage no later than 10am August 1, 2019

- Clearly mark each box with "SACHEL INSERTS"
- Inserts must be no larger than a two page A4 brochure
- Please use delivery label provided. Please mark C/- Ty Fleming

SPECIAL SOUND EFFECTS AND GIVEAWAYS

Objectionable audible, visual attention-seeking devices or effects and offensive odours from exhibits are prohibited. Sample/giveaways shall not interfere with other exhibitors' space.

You may not place any material outside your booth space.

STAFF REGISTRATION & ACCOMMODATION BOOKING FORMS

Staff name changes can be made after this but invoices cannot be altered.

Company Name: _____

Address (invoicing address): _____

Contact person (this person will be responsible for all correspondence relating to this conference)

Name: _____

Phone (W) _____ Mobile: _____

Email: _____

*Indicate for each person if this registration is FOC (Free of charge) or not.
Refer to the Prospectus for FOC entitlements.*

*If you are unsure who will be on-site, a 'Generic' badge can be arranged.
Write 'STAFF' in the name section. (see exhibitor staff registration section on p6)*

1. Name: _____

Special Dietary Requirement: (please tick) Vegetarian/Vegan Gluten Free
*additional costs will apply Lactose Intolerant Coeliac
 Other:* _____ Allergy to: _____

Sponsor/Exhibitor Registration

FOC (as per Prospectus) 2-day registration \$375 Friday \$225 Saturday \$225 \$ _____

Networking Function Ticket (No req) _____ @ \$75 each \$ _____

Accommodation: *Sheraton Grand Mirage Resort - Gold Coast - \$285 pr/pn*

Full payment for accommodation is required

Single (Single Occupancy) Double (1 bed/2 people) Twin (2 beds/2 people)

Check-in date: _____ ETA: _____ Check-out date: _____ No. Nights _____

Sharing with: _____ Special requests: (cot, disabled facilities etc): _____

2. Name: _____

Special Dietary Requirement: (please tick) Vegetarian/Vegan Gluten Free
*additional costs will apply Lactose Intolerant Coeliac
 Other:* _____ Allergy to: _____

Sponsor/Exhibitor Registration

FOC (as per Prospectus) 2-day registration \$375 Friday \$225 Saturday \$225 \$ _____

Networking Function Ticket (No req) _____ @ \$75 each \$ _____

Accommodation: *Sheraton Grand Mirage Resort - Gold Coast - \$285 pr/pn*

Full payment for accommodation is required

Single (Single Occupancy) Double (1 bed/2 people) Twin (2 beds/2 people)

Check-in date: _____ ETA: _____ Check-out date: _____ No. Nights _____

Sharing with: _____ Special requests: (cot, disabled facilities etc): _____

3. Name: _____

Special Dietary Requirement: (please tick) Vegetarian/Vegan Gluten Free
*additional costs will apply Lactose Intolerant Coeliac
 Other:* _____ Allergy to: _____

Sponsor/Exhibitor Registration

FOC (as per Prospectus) 2-day registration \$375 Friday \$225 Saturday \$225 \$ _____

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Single (Single Occupancy) Double (1 bed/2 people) Twin (2 beds/2 people)

Check-in date: _____ ETA: _____ Check-out date: _____ No. Nights _____

Sharing with: _____ Special requests: (cot, disabled facilities etc): _____

4. Name:

Special Dietary Requirement: (please tick) Vegetarian/Vegan Gluten Free
*additional costs will apply Lactose Intolerant Coeliac
 Other:* _____ Allergy to: _____

Sponsor/Exhibitor Registration

FOC (as per Prospectus) 2-day registration \$375 Friday \$225 Saturday \$225 \$ _____

Networking Function Ticket (No req) _____ @ \$75 each \$ _____

Accommodation: *Sheraton Grand Mirage Resort - Gold Coast - \$285 pr/pn*

Full payment for accommodation is required

Single (Single Occupancy) Double (1 bed/2 people) Twin (2 beds/2 people)

Check-in date: _____ ETA: _____ Check-out date: _____ No. Nights _____

Sharing with: _____ Special requests: (cot, disabled facilities etc): _____

5. Name:

Special Dietary Requirement: (please tick) Vegetarian/Vegan Gluten Free
*additional costs will apply Lactose Intolerant Coeliac
 Other:* _____ Allergy to: _____

Sponsor/Exhibitor Registration

FOC (as per Prospectus) 2-day registration \$375 Friday \$225 Saturday \$225 \$ _____

Networking Function Ticket (No req) _____ @ \$75 each \$ _____

Accommodation: *Sheraton Grand Mirage Resort - Gold Coast - \$285 pr/pn*

Full payment for accommodation is required

Single (Single Occupancy) Double (1 bed/2 people) Twin (2 beds/2 people)

Check-in date: _____ ETA: _____ Check-out date: _____ No. Nights _____

Sharing with: _____ Special requests: (cot, disabled facilities etc): _____

6. Name:

Special Dietary Requirement: (please tick) Vegetarian/Vegan Gluten Free
*additional costs will apply Lactose Intolerant Coeliac
 Other:* _____ Allergy to: _____

Sponsor/Exhibitor Registration

FOC (as per Prospectus) 2-day registration \$375 Friday \$225 Saturday \$225 \$ _____

Networking Function Ticket (No req) _____ @ \$75 each \$ _____

Accommodation: *Sheraton Grand Mirage Resort - Gold Coast - \$285 pr/pn*

Full payment for accommodation is required

Single (Single Occupancy) Double (1 bed/2 people) Twin (2 beds/2 people)

Check-in date: _____ ETA: _____ Check-out date: _____ No. Nights _____

Sharing with: _____ Special requests: (cot, disabled facilities etc): _____

7. Name:

Special Dietary Requirement: (please tick) Vegetarian/Vegan Gluten Free
*additional costs will apply Lactose Intolerant Coeliac
 Other:* _____ Allergy to: _____

Sponsor/Exhibitor Registration

FOC (as per Prospectus) 2-day registration \$375 Friday \$225 Saturday \$225 \$ _____

Networking Function Ticket (No req) _____ @ \$75 each \$ _____

Accommodation: *Sheraton Grand Mirage Resort - Gold Coast - \$285 pr/pn*

Full payment for accommodation is required

Single (Single Occupancy) Double (1 bed/2 people) Twin (2 beds/2 people)

Check-in date: _____ ETA: _____ Check-out date: _____ No. Nights _____

Sharing with: _____ Special requests: (cot, disabled facilities etc): _____

8. Name:

Special Dietary Requirement: (please tick) Vegetarian/Vegan Gluten Free
*additional costs will apply Lactose Intolerant Coeliac
 Other:* _____ Allergy to: _____

Sponsor/Exhibitor Registration

FOC (as per Prospectus) 2-day registration \$375 Friday \$225 Saturday \$225 \$ _____

Networking Function Ticket (No req) _____ @ \$75 each \$ _____

Accommodation: *Sheraton Grand Mirage Resort - Gold Coast - \$285 pr/pn*

Full payment for accommodation is required

Single (Single Occupancy) Double (1 bed/2 people) Twin (2 beds/2 people)

Check-in date: _____ ETA: _____ Check-out date: _____ No. Nights _____

Sharing with: _____ Special requests: (cot, disabled facilities etc): _____

9. Name:

Special Dietary Requirement: (please tick) Vegetarian/Vegan Gluten Free
*additional costs will apply Lactose Intolerant Coeliac
 Other:* _____ Allergy to: _____

Sponsor/Exhibitor Registration

FOC (as per Prospectus) 2-day registration \$375 Friday \$225 Saturday \$225 \$ _____

Networking Function Ticket (No req) _____ @ \$75 each \$ _____

Conference Dinner Ticket (No req) _____ @ \$200 each \$ _____

Accommodation: *Sheraton Grand Mirage Resort - Gold Coast - \$285 pr/pn*

Full payment for accommodation is required

Single (Single Occupancy) Double (1 bed/2 people) Twin (2 beds/2 people)

Check-in date: _____ ETA: _____ Check-out date: _____ No. Nights _____

Sharing with: _____ Special requests: (cot, disabled facilities etc): _____

10. Name:

Special Dietary Requirement: (please tick) Vegetarian/Vegan Gluten Free
*additional costs will apply Lactose Intolerant Coeliac
 Other: * _____ Allergy to: _____

Sponsor/Exhibitor Registration

FOC (as per Prospectus) 2-day registration \$375 Friday \$225 Saturday \$225 \$ _____

Networking Function Ticket (No req) _____ @ \$75 each \$ _____

Accommodation: *Sheraton Grand Mirage Resort - Gold Coast - \$285 pr/pn*

Full payment for accommodation is required

Single (Single Occupancy) Double (1 bed/2 people) Twin (2 beds/2 people)

Check-in date: _____ ETA: _____ Check-out date: _____ No. Nights _____

Sharing with: _____ Special requests: (cot, disabled facilities etc): _____

PAYMENT FORM

Company Name: _____

AMOUNT PAYABLE

Accommodation Charges _____ @ \$285 per night \$ _____

Registration/s (as indicated) \$ _____

Social Tickets \$ _____

Outside Contractor _____ @ \$98 each per day \$ _____

Total Payable \$ _____

CREDIT CARD PAYMENT

Visa MasterCard (no AMEX or Diners)

Name on credit card

Card No

Expiry date \$ _____
Amount

Signature CVV

DIRECT DEPOSIT

Name: RANZCO

Bank: CBA BSB: 062-016 Account Number: 11614344

(use your name + RANZCOqld19)

Please send a copy of the transfer to tdf@conferencelink.com.au with the name of the company.

CHEQUE PAYMENT

Make cheque payable to **RANZCO**

Post to: C/- Conference Link, PO Box 42, FERNY HILLS DC QLD 4055

The information contained in this brochure is correct at the time of going to print. The Committee reserves the right to change without notice any part of the program, set up or speakers.

Address:	Attn: <i>RANZO QLD Branch Event c/o Ty Fleming</i> Loading Dock (hours 0800 to 1500 Monday - Friday) Sheraton Mirage Resort & Spa Gold Coast Seaworld Drive Main Beach QLD 4217
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Senders Details:	

Conference Details	RANZCO QLD Branch Event TY FLEMING / CONFERENCE LINK
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Total # of Boxes:		This Box #:	of
Booth #	OR	Satchel Inserts	

Transport/Courier Co.		Con. note #	
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