

# Exhibitor Booking Form



<b>Event Details</b>	
Event Name	
Event Venue	
Event Date	
<b>Billing Details</b>	
Company Name	
Company Address	
Contact Name	
Designation	
Email Address	
Office No.	
Mobile No.	
<b>Sponsorship Package Selection ---- please tick (✓) and indicate quantity</b>	
Main Sponsor (RM132,000.00)	
Platinum Sponsor (RM99,000.00)	
Gold Sponsor (RM66,000.00)	
Silver Sponsor (RM33,000.00)	
Convention Keynote Speaker Sponsor (Custom)	
Convention Speaker Sponsor (RM13,200.00)	
Convention Workshop Speaker Sponsor (RM16,500.00)	
Workshop Support (Custom)	
Conference Bag Sponsor (RM5,500.00)	
Lucky Draw Sponsor (Custom)	
<b>Advertisement Package Selection ---- please tick (✓) and indicate quantity</b>	
MDA Convention Apps (RM250.00)	
Conference Bag Insert (RM500.00)	

Bunting Placement (RM1,500.00)	
E-Souvenir Programme Book (RM1,800.00)	
Horizontal Hanging Banner (RM2,700.00)	
Vertical Hanging Banner (RM3,500.00)	
<b>Exhibition Package Selection ---- please (✓) and indicate quantity</b>	
9sqm Standard Corner Shell Scheme Booth @ Prime Location (RM8,500.00 / USD1,900.00)	
9sqm Standard Corner Shell Scheme Booth @ Other Location (RM8,000.00 / USD 1,800.00)	
9sqm Standard One Side Open Shell Scheme Booth @ Prime Location (RM8,000.00 / USD1,800.00)	
9sqm Standard One Side Open Shell Scheme Booth @ Other Location (RM7,500.00 / USD1,700.00)	
<b>Booth Details</b>	
Booth Name	
Booth Quantity	
Booth Selection (Booth No.)	1st Choice:
	2nd Choice:
	3rd Choice:
<b>I / We hereby certify and confirm that the information furnished above are correct.</b>	
Signature and Company Stamp	
Name and Designation	
Contact No.	
Date	

**Remarks:** A complete booking form and Establishment License from the Medical Device Authority are to be sent to [mdaexhibition@gmail.com](mailto:mdaexhibition@gmail.com). A non-refundable booking fee of 50% of the total charges must be made within 7 working days upon receiving the official invoice from the organizer, Malaysian Dental Association.