

## AUDIOVISUAL COMMUNICATION TECHNOLOGY

Southport, QLD 4215 AUSTRALIA PH: 1300 76 77 55 PH: +61 (0)7 5597 4311 FAX: +61 (0)7 5597 4322

### CONFERENCE ENQUIRY FORM (1)

#### BUSINESS DETAILS

**Business Name:** \_\_\_\_\_

**Business Address:** \_\_\_\_\_

**Business Contact Number:** \_\_\_\_\_

**Business Fax Number:** \_\_\_\_\_

#### PERSONAL DETAILS

**Your Contact Name:** \_\_\_\_\_

**Contact Mobile Number:** \_\_\_\_\_

**Position Held:** \_\_\_\_\_

#### CONFERENCE DETAILS

**Conference Name:** \_\_\_\_\_

**Date of Conference:** \_\_\_\_\_

**Name of Conference Organiser:** \_\_\_\_\_

**Venue of Conference:** \_\_\_\_\_

**Venue Contact Person:** \_\_\_\_\_

**Venue Contact Number:** \_\_\_\_\_

**Number of delegates attending Conference:** \_\_\_\_\_

**Number of guest presenters attending Conference:** \_\_\_\_\_

**Number of delegates attending Main Sessions (Plenary Session):** \_\_\_\_\_

**Number of break out rooms:** \_\_\_\_\_

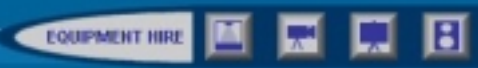
**Number of people attending each break out room:** \_\_\_\_\_

#### OTHER DETAILS

**Other companies that have been contacted (in relation to other areas of the conference):** \_\_\_\_\_

**Do you have any special requests/needs?** \_\_\_\_\_

**Date this quote must be submitted by:** \_\_\_\_\_



AUDIOVISUAL COMMUNICATION TECHNOLOGY

Southport, QLD 4215 AUSTRALIA PH: 1300 76 77 55 PH: +61 (0)7 5597 4311 FAX: +61 (0)7 5597 4322

CONFERENCE ENQUIRY FORM (2)

REQUIREMENT DETAILS

What are the requirements of your guest speakers?

Multiple horizontal lines for text input.

Suggested equipment that needs to be quoted by Blue Shadow Group:

Multiple horizontal lines for text input.

Do you require a technician to be present?

If yes, for how long? (Duration of the conference etc.)

Do you require exhibition booths?

If yes, how many?

Multiple horizontal lines for text input.