MAKERERE UNIVERSITY COLLEGE OF HEALTH SCIENCES (MakCHS) - 15th Joint Annual Scientific Health (JASH) Conference **UGANDA MEDICAL ASSOCIATION - 4th Grand Doctors' Conference 2019**

MINISTRY OF HEALTH IN PARTNERSHIP WITH HABIB MEDICAL SCHOOL OF IUIU & INFECTIOUS DISEASES INSTITUTE -4th Antimicrobial Resistance (4th AMR) Conference

UGANDA NATIONAL ASSOCIATION OF COMMUNITY & OCCUPATIONAL HEALTH (UNACOH) - 28th Annual conference AND

WORLD HEALTH ORGANIZATION (WHO) - 18th Annual Dr. Matthew Lukwiya Memorial Lecture

DATE: Wednesday 06th - Friday 08th November 2019 VENUE: Hotel Africana Kampala, Uganda AUDIENCE: 600 - 700 Doctors & Health Scientists from Hospitals all over Uganda, Makerere University College of Health Sciences and other Health/Medical Training Institutions as well as Policy makers from Ministry of Health EXPECTED GUEST OF HONOUR: H.E Yoweri Kaguta Museveni, President of the Republic of Uganda

EXHIBITION FEES AND APPLICATION FORM

You can exhibit in the Exhibition Tent, Abstract book/Magazine or other as specified in the table below:

EXHIBITION APPLIED FOR (Circle Serial number on Left to tell us your choice):

Exhibition At Lieb tok (Circle Schai Homber on Len 10 len 03 your cho	<u></u>
AREA/SPACE APPLIED FOR:	UGX
1. One by two metres Table in exhibition Tent (One person per table, entitled to break tea, lunch & evening tea)	1,000,000/=
2. *Full page: Inside front cover, or back cover of abstract book	3,000, 000/=
3. Full page: Anywhere inside the abstract book	1,000,000/=
4. Half page: inside the abstract book	500,000/=
5. Quarter page: inside the abstract book	300,000/=
6. Display on the plenary Hall Screens during breaks for 3 days	1,000,000/=
7. Visibility on the conference website as a sponsor/funder	300,000/=
8. Items 1, 3, 6, and 7 above plus a presentation for 10 minutes in the plenary to popularise your Program/Project/Service/Drug/Equipment, e.t.c. plus Exhibition table (Bring maximum 2 people who will be entitled to break tea, lunch & evening tea for three days) AND Verbal Recognition as a Key Sponsor in the Plenary by the UMA President and Principal MakCHS	15,000,000/=
9. All in 8 above plus a dedicated symposium in Plenary Hall for 1-2 hours and, if requested, a breakaway group meeting e.g. Research Group meeting, or departmental, or section meeting	USD 10,000

EXHIBITION APPLICATION FORM: (Note: all Exhibitors to be listed on the Conference Website as soon as payment is received, and their **company logos** to be listed on the Funders recognition page in the abstract book)

Company/Organization legal r	name:		
Physical address	Plot:		
	Street:		
	City/Town:		
	Country:		
Postal address:			
Nature of Business:			
Official phone number:			
Name of Contact person:			
Phone No.(s) of contact person:			
Email address of contact person:			
	•	am, Project, Services such as Health	
Care/Laboratory/ Insurance/Ban	king, Drugs, Medical/Lab instru	uments/Supplies, Clothes, Electronics, etc.	

Note: Unlicensed items such as herbal medicines shall not be accepted at the exhibition hall/tent, and no refunds shall be expected.

HOW TO PAY EXHIBITION FEES: *Before payment, Call secretariat (Ritah 0780 447 206) to confirm availability of space inside front/back covers, if applicable. OPTION 1: Pay by depositing cash in the bank details below. OPTION 2: Pay by TT/ Cheque to the bank details below. Once payment is done into the bank, send a scanned copy of the bank slip and the filled **Exhibition application** form to: <jash.gdc2019@gmail.com> Once we have received your payment and filled Exhibition application form, we will issue a receipt to you either physically or thru an email and also book you on the list of exhibitors. TERMS: 100% pre-payment before acceptance of your application, No refunds. DEADLINE: 20th Oct 2019 @ 23 59 hrs.

AUTHORIZATION BY YOUR COMPANY / INSTITUTION / DEPARTMENT:

Name:	Official stamp:
Authorised Signature:	Date

CONFERENCE SECRETARIAT

Makerere Univ. College of Health Sciences School of Biomedical Science Microbiology-Pathology Building 2nd floor, Room C22,

E-mail: <jash.gdc2019@gmail.com> Website: www.umaconference.org

P. O Box 7072 Kampala, Uganda. Ritah 0780 447 206 / Freddie 0772 662 876

ACCOUNT DETAILS:

Account No.: UGX 903 000 565 5047; USD 903 000 806 8061 Account Title: Makerere University College of Health Sciences Research Bank & branch: Stanbic Bank Uganda Limited, Crested Towers branch Bank address: Hannington Road Kampala, Uganda; P.O. Box 7131 K'la **SWIFT Code: SBICUGK**