Association of Oral & Maxillofacial Surgeon of India

	Confe	rence Bid Form	
		Date Submitted	
Name of the Bidder		AOMSI Membership No:	
Address		Contact No	
City		State	
CONFERENCE	Midterm	Annual	
For the year			
Conference City		State	
Connectivity	Nearest Airport Nearest Railway		
Distance by Road fron	n Nearest airport Nearest railway station		
VENUE DETAILS			
Name:			
Facilities Available:			
	Scientific Program	Surface in Area (Sq Ft)	Capacity to Seat
	Main Auditorium		
	Hall 1		
	Hall 2		
	Hall 3		
	Exhibition		
	Total Area		
	No. of stalls can be accommodated		
	Poster Area		
	Lunch Area		
	Registration Area		
	No. of Registration Counters		

Social program		Proposed Venue	Distance from Conference venue
Inagur	ation & Dinner		
Gala B	anquet		
			•
Accomodation Availability		Rooms	Price
5 star l	hotels		
4 star l	hotels		
3 star l	hotels		
Low co	ost hotels		
In house facitlity Available		Yes	No
REVENUE			
Registration	Estimated Number	Fee proposed	Estimated Revenue
AOMSI members			
Non AOMSI members			
AOMSI Trainees			
Non AOMSI Trainees			
Accompanying Person			
Sub Total			
Stalls			
Sponsorship			
Souvenier			
Grand Total			
EXPENDITURE			
Venue		TOTAL COSTING	
Rental]
Nentai			
Website & Mobile Apps			
Website & Mobile Apps			ı
Printing			
	all Brochure]
First Call Brochure Final Brochure			1
Certificates			1
Other Stationery			1
Other :	J. G. LOLICI Y		J
Postage]
			_
Audio Visual Requirements fo	or Conference		

Signages, Backdrop, Banner			
Conference Bags / Gifts			
Trade & Exhibition			
Trade & Exhibition			
Catering			
_			
Banquet including Liquor			
			1
Photography & videography			
Security for Conference venue	,		
,			
Accommodation expenses (If a	any)		
			l
Local Transport			
National Language Francisco			
Miscellaneous Expenses			
Any other Expenses Specify			
TOTAL EXPENDITURE			
D			
Revenue from all Sources			
Total Expenses			
·			
Excess of Income over expense	es		
CONFERENCE ORGANISING CO	OMMITTEE		
ORGANISING COMMITTEE	ı	NAME	AOMSI MEMBERSHIP NO
Organising Chairman			
Organising Secretary			
Treasurer Scientific Chairman			
Scientific Chairman			

	SIGNATORIES	
NAME	AOMSI MEMBERSHIP NO	SIGNATUR
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