Let's Meet Tomorrow



Support for Homegrown Regional / International Conventions





Malaysia. Convention Exhibition Bureau

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Support for Homegrown Regional / International Conventions

PACKAGE

One (1) Full-day meeting package at a campaign partner's venue.

Criteria:

- 1. The support package is exclusive for association meetings or conferences with a minimum of 120 delegates which consists a minimum of 10% regional or international delegates.
- 2. Minimum of two (2) full event days.
- The organisation applying for support must be registered with the Companies Commission of Malaysia or Registry of Societies of Malaysia and an active national association, professional conference organiser, association management company or a registered corporate company.
- 4. Event must be held at a participating campaign partner's venue.
- 5. Application must be received by Malaysia Convention & Exhibition Bureau (MyCEB) at least thirty (30) days prior to the event date.

Terms and conditions:

- 1. Payment for meeting package will be made directly to the venue after event completion.
- 2. All participating campaign partners need to comply with the post COVID-19 safety measures advised by the Ministry of Health Malaysia.
- 3. This offer is not valid with any other MyCEB campaign or support.
- 4. Campaign is valid until December 2021 and subject to availability.

Let's connect:

Convention Unit

Malaysia Convention & Exhibition Bureau (MyCEB) Level 20, Menara 2, Menara Kembar Bank Rakyat, No. 33, Jalan Rakyat, 50470 Kuala Lumpur, Malaysia
 Tel
 : +603 2264 3000

 Fax
 : +603 2276 4092

 Email
 : mycebsa@myceb.com.my

 Web
 : www.myceb.com.my



myceb.com.my/meetinmalaysia

Let's MeetTomorrow

Homegrown Regional / International Conventions



EVENT PROFILE

Event Venue :	Event Name :	Event Name :								
Event Website : Industry Sector (a.g. medical, finance) :: Image: Sector (a.g. medical, finance) :: Delegate Forice : Number of Delegates Image: Sector (a.g. medical, finance) :: Delegate Forice : Image: Sector (a.g. medical, finance) :: Image: Sector (a.g. medical, finance) :: Delegate Sector : Image: Sector (a.g. medical, finance) :: Image: Sector (a.g. medical, finance) :: Total Room Nights : Image: Sector (a.g. medical, finance) :: Image: Sector (a.g. medical, finance) :: Day Programme Outline (briefly outline your confirmed or proposed programme including arrival and departure details): Image: Sector (a.g. medical, finance) :: Day Programme Outline (briefly outline your confirmed or proposed programme including arrival and departure details): Image: Sector (a.g. medical, finance) :: Day Programme Outline (briefly outline your confirmed or proposed programme including arrival and departure details): Image: Sector (a.g. medical, finance) :: Day Programme Outline (briefly outline your confirmed or proposed programme. Image: Sector (a.g. medical, finance) :: Note: Atternatively, you may enclose a copy of the programme. Image: Sector (a.g. medical, finance) :: Image: Sector (a.g. medical, finance) :: Sector (a.g. medical, finance) :: I	Event Date (DD/MM/YYYY to DD/MM/YYYY) :									
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Outline a list of major supporters and sponsors for this event. Alternatively, you may enclose an attachment.										
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REQUEST FOR SUPPORT

Let's MeetTomorrow Homegrown Regional / International Conventions



DETAILS OF AFFILIATED INTERNATIONAL ORGANISATION (If applicable)

Company :			
Company License or Business	s Registration Number :		
Address :			
State/Province :			
Country :	Postcode :		
Company Telephone :	Company Fax :	Company Website :	
Company Type :			
O Corporation	O Government	O Association / Non-Government Organisation	
O Others (please specify) :			
CONTACT PERSON			
Full Name (salutation, first na	me, surname) :		
Designation :			
Telephone :	Fax :	Mobile :	
Email :			

DETAILS OF LOCAL HOST

Company :				
Company License or Business Registre	ration Number :			
Address :				
State/Province :				
Country :	Postcode :			
Company Telephone :	Company Fax :	Company Website :		
Company Type :				
O Corporation	O Government	O Association / Non-Government Organisation		
O Others (please specify) :				
CONTACT PERSON				
Full Name (salutation, first name, sur	name) :			
Designation :				
Telephone :	Fax :	Mobile :		

I/We hereby confirm that I/We shall give the consent to Malaysia Convention & Exhibition Bureau (MyCEB) to use our personal data for the purpose of subvention and any related purpose subject to the terms and conditions and in the manner set under the Personal Data Protection Act 2010, Malaysia.

Date of Application (DD/MM/YYYY) :	Please return completed form to:
SIGNATURE :	Convention Unit Malaysia Convention & Exhibition Bureau (MyCEB) Level 20, Menara 2, Menara Kembar Bank Rakyat, No. 33, Jalan Rakyat, 50470 Kuala Lumpur, Malaysia
NAME : COMPANY STAMP :	Tel : +603 2264 3000 Fax : +603 2276 4092 Email : mycebsa@myceb.com.my Web : www.myceb.com.my