

EXHIBITORS INFORMATION PACK



THEME | TOWARDS PATIENTS AND
POPULATION CENTERED SERVICES

60th EMA Annual Medical Conference
and International Health Exhibition



08-10 March
2024



Ethiopian Skylight Hotel



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WHO IS EMA?

The Ethiopian Medical Association (EMA) is the first professional association in the country, was formally established in July 1962 through a formal Charter granted to it by Emperor Haile Selassie I.

EMA is a membership organization representing medical doctors registered to practice in Ethiopia with a vision to see a healthy and prosperous Ethiopian community having access to quality health services, and a mission to ensure the community gets quality health service; promote the highest standards in medical education, science, art, and practice; and ensure the rights and benefits of medical doctors.

The Association has more than 6000 registered members and 13 branch offices located in different regions of the country. It engages its members in multiple approaches including the recently launched Junior Doctors Network and network of Ethiopian Diaspora Doctors.



“Roles and responsibilities of profe
the public stakeholders in mo



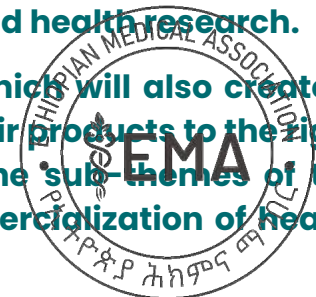
About Event

3000 INTERNATIONAL AND
LOCAL ATTENDANTS

EMA has been conducting the annual medical conference and international health exhibition since its establishment. The association is currently preparing to conduct its 60th Annual Medical conference and International Health Exhibition (AMC and IHE) from March 8 to 10, 2024 in Addis Ababa, Ethiopia.

The conference and exhibition will be attended by more than 3000 international and local attendants where it creates an opportunity to disseminate new advances in medical technology and medical and health research.

New programs in the field of health and medicine will be presented at the conference, which will also create a platform for international and local drug and medical device manufacturers to promote their products to the right audience. Moreover, there will be plenary sessions on the following topics, which are the sub-themes of the conference: Inter-professional collaboration, provider and patient communication, commercialization of health care, and the rising cost of health care services





AVAILABLE PACKAGES FOR EXHIBITOR



PACKAGE AVAILABLE **50**



EXHIBITOR

EXHIBITOR WILL RECEIVE

- One(1) dedicated 6 meter sq. for branding and to showcase your services/products at the convenient venue at Ethiopia Skylight Hotel.
- Many more attractive benefits.

EMA BANK INFORMATION

| | |
|----------------------------|--------------------------------------|
| Bank Name | Commercial Bank Of Ethiopia |
| Branch Name | Addis Ababa Branch |
| Bank Account Name | Ethiopian Medical Association |
| Bank Account Number | 1000084538543 |
| BANK ADDRESS | A.A |
| SWIFT CODE | CBETETAA |
| BANK COUNTRY | ETHIOPIA |



ACCEPTANCE FORM

I _____ (name).....representing
 (organization).....hereby confirm to be exhibitor on the **60th EMA Annual Conference and
 International Health Exhibition** with an amount of
 ETB _____ (Number) _____ (Amount in words)or
 USD _____ (Number) _____
 (amount in words) By signing this form, I agree to the terms and conditions included in the Sponsorship Pack.

[A] Exhibitor’s Contact Information

Please fill in the fields below along with your reservation payment.

| | |
|------------------------|--|
| Signatory Name: | |
| Position: | |
| Company / Organization | |
| Website | |
| Address | |
| City, Postal/Zip Code | |
| Country | |
| Phone | |
| Email | |
| Contact Person | |



[B] Packages and Rates

| | | |
|------------------------|------------------------------------|--|
| Exhibitor Space | <input type="checkbox"/> Exhibitor | |
|------------------------|------------------------------------|--|

Upon signature of the Acceptance Form, a minimum of 50% of the total amount of exhibition space should be settled, then EMA will issue an invoice, which will be forwarded to exhibitor. Full payment should be received between till February 15, 2024.

[C] Payments

Please select method of payment:

- By bank transfer:
- By CPO:

[D] Signature

I agree to the terms of agreement attached to this acceptance form and accept the above commitment

Company representative

Name _____

Signature _____

Seal _____



TERMS OF AGREEMENT

- All Exhibitor levels must be reserved by advance payment of 50% of the total amount of the exhibitor
- The remaining amount of payment should be paid in between till February 15, 2024. And should collect an invoice from EMA finance before coming on the event.
- Post event payment is not allowed and Exhibitors should adhere to the scheduled date of payments.
- Exhibitors that have shown a full paid invoice will be allowed to set up their space, one day ahead of the event. (the specific time for setup will be notified by the event coordinators)
- All payments should be made through bank transfer or CPO by the name of Ethiopia Medical Association
- All prices include VAT, currently at 15%.
- All Exhibitors should only bring promotional materials that has been listed on the package. It is strictly forbidden to bring any material than it has not been promised on package.
- Exhibitors are allowed to promote their services/products on the time allowed, on their space, they have been allocated.
- Sponsors /Advertisers/Exhibitors bear the responsibility and cost for providing camera-ready artwork. Precise specifications for the artwork will be provided by the Exhibitor Offer.
- Exhibitors are allocated on first-come, first-served basis.
- International Exhibitors , please inform the coordinator to get international bank account number
- The Organizing Committee reserves the right to refuse sponsorship/Exhibitor under specific circumstances.
- Coordinators/sales team representative to sign an “Acceptance Form” on the side of the company representative
- Communicate the coordinators for further information, instructions, invoicing, payments, and technical procedures.

Cancellation of any portion of the: “Acceptance Form” by the Sponsors/Advertisers/Exhibitors will not be accepted and there will not be any refund.

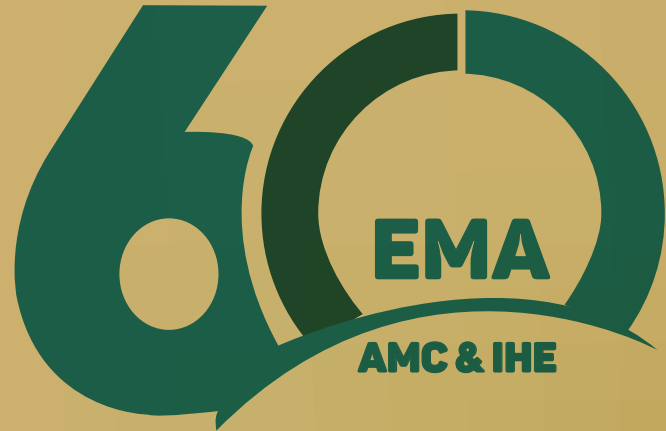




SAMPLES OF GIVEAWAYS AND ADVERTISING MATERIALS







CONTACT INFORMATION

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Website address:-

www.eventsema.com

