

The UBC CPD Guidelines for Support state the terms, conditions, and purposes by which commercial sponsorship provided must be documented in a written agreement that is signed by the Physician Organization and for-profit/not-for-profit sponsors.

The following is a template of a written agreement that can be signed by both parties.

## SPONSORSHIP AGREEMENT

---

<<CPD Activity Title>>

<<Date(s)>>

<<Location>>

Gold Sponsor \$5,000	<ul style="list-style-type: none"><li>· 1 x trade table at first choice of location</li><li>· 3 x complimentary registrations for company representatives to audit the CPD activity</li><li>· Verbal acknowledgement as sponsor during welcoming remarks (unaccredited time)</li><li>· Written acknowledgement in program materials and signage (separate from education)</li><li>· Inclusion of logo on thank you slide displayed on screen during breaks</li></ul>
Silver Sponsor \$3,000	<ul style="list-style-type: none"><li>· 1 x trade table at choice of location</li><li>· 2 x complimentary registrations for company representatives to audit the CPD activity</li><li>· Verbal acknowledgement as sponsor during welcoming remarks (unaccredited time)</li><li>· Written acknowledgement in program materials and signage (separate from education)</li><li>· Inclusion of logo on thank you slide displayed on screen during breaks</li></ul>
Bronze Sponsor \$1,500	<ul style="list-style-type: none"><li>· 1 x trade table at first choice of location</li><li>· 3 x complimentary registrations for company representatives to audit the CPD activity</li><li>· Verbal acknowledgement as sponsor during welcoming remarks (unaccredited time)</li><li>· Written acknowledgement in program materials and signage (separate from education)</li><li>· Inclusion of logo on thank you slide displayed on screen during breaks</li></ul>

Company Name:

Contact Person:

Contact Details:

Please select one:

- Gold
- Silver
- Bronze

Subtotal        \$ \_\_\_\_\_ + GST  
Total Payable   \$ \_\_\_\_\_ Payable to [Physician Organization Name]

We understand by submitting this agreement to the <<**Physician Organization Name**>> that we are contractually obligated to guarantee payment prior to the conference dates. By signing this contract we are responsible for the amount of our selected educational sponsorship grant in exchange for the sponsorship opportunities listed in the invitation letter. We understand that we cannot forfeit or reduce our support grant once this agreement is signed.

Signature (Company)	_____	Date	_____
Signature (Physician Organization)	_____	Date	_____