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| **Enquiry for Events at the International Academic Forum Heidelberg** | | | |
| **Title of the conference** | Klicken Sie hier, um Text einzugeben. | | **Number of participants:** Klicken Sie hier, um Text einzugeben. |
| **Conference date** | From: Klicken Sie hier, um ein Datum einzugeben. | | |
| Until: Klicken Sie hier, um ein Datum einzugeben. | | |
| **Organizer details** | | | |
| Organizer | | Contact person | |
| University/Institute | Klicken Sie hier, um Text einzugeben. | Tel. | Klicken Sie hier, um Text einzugeben. |
| Name | Klicken Sie hier, um Text einzugeben. | Fax | Klicken Sie hier, um Text einzugeben. |
| Address | Klicken Sie hier, um Text einzugeben. | E-Mail | Klicken Sie hier, um Text einzugeben. |
| **Other organizer(s)** | | | |
| Organizer | | Contact person | |
| University/Institute | Klicken Sie hier, um Text einzugeben. | Tel. | Klicken Sie hier, um Text einzugeben. |
| Name | Klicken Sie hier, um Text einzugeben. | Fax | Klicken Sie hier, um Text einzugeben. |
| Address | Klicken Sie hier, um Text einzugeben. | E-Mail | Klicken Sie hier, um Text einzugeben. |
| **Billing address (Please note that when the total bill amount needs to be split between various organizers, an administration fee of € 5,00 will be charged per bill)** | | | |
| University/Institute | Klicken Sie hier, um Text einzugeben. | Tel. | Klicken Sie hier, um Text einzugeben. |
| Name | Klicken Sie hier, um Text einzugeben. | Fax | Klicken Sie hier, um Text einzugeben. |
| Address | Klicken Sie hier, um Text einzugeben. | E-Mail | Klicken Sie hier, um Text einzugeben. |
| Uni Internal Order-Number | Klicken Sie hier, um Text einzugeben. | | |
| **Type of conference** | | | |
| Wählen Sie ein Element aus. | | | |
| **Date of the enquiry** | | | |
| Klicken Sie hier, um ein Datum einzugeben. | | | |

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| 1. Does the Conference take place with the participation of the University of Heidelberg?  1.a  🞏 Yes, the University is the sole organizer (internal conference/event)2  🞏 No (external organizer)2  Billing address: Klicken Sie hier, um Text einzugeben.  Klicken Sie hier, um Text einzugeben.  Klicken Sie hier, um Text einzugeben.  Klicken Sie hier, um Text einzugeben.  🞏 Yes, an institute of the University presents the event in conjunction with an  external partner. 🡪 Continue to 2  2. If in conjunction with an Institute of the University: who would be the designated organizer? 1  🞏 The University of Heidelberg  🞏 The external partner22  Billing address: Klicken Sie hier, um Text einzugeben.  Klicken Sie hier, um Text einzugeben.  Klicken Sie hier, um Text einzugeben.  Klicken Sie hier, um Text einzugeben.  Only one billing address is permitted. Splitting of the invoice is not possible for tax reasons. If the university is the organizer of the event, the external partner can contribute to the costs by means of a subsidy or a sponsorship (see special information sheet).  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  1 The organizer function is held by the person with whom the participants have a direct legal relationship, e.g. Entitlement to payment of participant fees, liability for failure of the event, etc.)  2 The institutions of the University of Heidelberg, including the medical faculty in Heidelberg are **internal** organizers. Uniklinikum Heidelberg und Mannheim, DKFZ, MPI’s, medical faculty Mannheim and other universities are **external** partners. |

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| **Information about participants** | | | | | |
| **!** | We would like to request you to fill this part as precisely as possible so that your conference can be integrated into the IWH-Symposium-Program. The topic needs to be interdisciplinary, international and young scientists should play an active role in the conference. The decision will be made by the curatorship of Heidelberg University. | | | | **!** |
| **Number of participants from Heidelberg University without young scientists (Please name the Institute)** | | | | | |
| Institute or Faculty | | Number of participants | Presentation | | |
|  | |  | Yes | No | |
|  | |  | Yes | No | |
|  | |  | Yes | No | |
|  | |  | Yes | No | |
|  | |  | Yes | No | |
| **Number of participants excluding young scientists** | | | | | |
| Germany (Please name the University and the Institute) | | Number of participants | Presentation | | |
|  | |  | Yes | No | |
|  | |  | Yes | No | |
|  | |  | Yes | No | |
|  | |  | Yes | No | |
|  | |  | Yes | No | |
| International participants (Please name the University and the Institute) | | Number of participants | Presentation | | |
|  | |  | Yes | No | |
|  | |  | Yes | No | |
|  | |  | Yes | No | |
|  | |  | Yes | No | |
|  | |  | Yes | No | |
| **Number of young scientists** | | | | | |
| Place of origin | | Number of participants | Presentation | | |
| Heidelberg | |  | Yes | No | |
| Within Germany | |  | Yes | No | |
| International | |  | Yes | No | |

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| **Poster-Session** | | |
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| Would there be a Poster-Session during the conference? | Yes | No |
| How many posters would be on display? |  | |
| Size of posters (Due to space and system constraints, we recommend A1 posters) | A1  A0  Others: | |
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**Important: Please fill in the following sections thoroughly. Based on the services chosen, we will prepare a cost estimate including the rent, accommodation, catering, service costs etc. We work with flat-rates per participant. Please use this estimate in case you want to apply for third-party funding. This information is not in any way binding - if your plans change at a later stage, the range of services may be adjusted accordingly.**

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| **Details of conference (please specify)**  **Note: please ask for number of seats concerning current distancing rules.** | | | | | |
| Type of conference room | From | To | Begin first day End last day | | Desired  Seating (arrangements) |
| Conference Hall  (max. 75 P.) | Klicken Sie hier, um ein Datum einzugeben. | Klicken Sie hier, um ein Datum einzugeben. |  | | Wählen Sie ein Element aus. |
| Workshop Room  (max. 20 P.) | Klicken Sie hier, um ein Datum einzugeben. | Klicken Sie hier, um ein Datum einzugeben. |  | | Wählen Sie ein Element aus. |
| **Details of accommodation** | | | | | |
| **Total number of guests requiring accommodation** | | | | **Wählen Sie ein Element aus.** | |
| Type of room | From | To | Number of nights | | Number of rooms |
| Single room | Klicken Sie hier, um ein Datum einzugeben. | Klicken Sie hier, um ein Datum einzugeben. |  | |  |
| Double room | Klicken Sie hier, um ein Datum einzugeben. | Klicken Sie hier, um ein Datum einzugeben. |  | |  |
| Triple occupancy (A3, A4, A7 and A8) | Klicken Sie hier, um ein Datum einzugeben. | Klicken Sie hier, um ein Datum einzugeben. |  | |  |

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| **Details of catering – Budget can be increased when needed** | | | | | | | | |
| Meals | Budget per person | | | Drinks (according to consumption) | Date and time  (multiple days possible) | Number of persons | Your notes  (allergies, etc.) | |
| Lunch buffet \* minimum number of participants: 20 | 24,00 €  26,00 € | | | Water, juice and soft drinks  Beer and wine  Coffee |  |  |  | |
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| Dinner buffet \* minimum number of participants: 20 | 24,00 €  26,00 € | | | Water, juice and soft drinks  Beer and wine  Coffee |  |  |  | |
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| **Reception and Finger Foods** | | | | | | | | |
| Pretzel sticks | 2€ | | 2,50€ | Water, juice and soft drinks  Beer and wine  Coffee  Prosecco |  |  |  | |
| Butter | | Cheese |
| Sandwiches | from 12,00 € | | |
| Canapes | from 17,00 € | | |
| **Coffee breaks (vegan and gluten free alternatives available)** | | | | | | | | |
| Type of break | | Budget per person | | Number of Coffee breaks/Fruit baskets | Date and time  (multiple days possible) | Number of persons | | Your notes  (allergies, etc.) |
| Coffee and Tea, also water and juices… | | | | | | | | |
| with biscuits/pastries | | 3,90 € | |  |  |  | |  |
| with cake | | 4,90 € | |  |  |  | |
| with 50% fruits/ 50% cakes (from 25 persons) | | 4,90 € | |  |  |  | |
| with fresh fruits | | 4,90 € | |  |  |  | |
| Extra Fruit Basket | | 2,50 € | |  |  |  | |

1. The IWH assumes no liability for intolerances and allergies that are not communicated in good time. The organizer takes care of this. Notification 4 weeks before the event is in good time.

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| **Further information** | | | |
| **Conference equipment** | | | **Fee** |
|  | Projection screen, laptop and projector | | € 0,00 |
|  | Flipcharts (squared) | | € 9,00 |
|  | Flipcharts (plain) | | € 9,00 |
|  | 1 Whiteboard for the conference hall | | € 0,00 |
|  | Whiteboards Workshop room | | € 0,00 |
|  | Poster system with partitions (Rent per day) | | € 60,00 |
|  | Presentation case (Usage charges per day) | | € 10,00 |
|  | Pin board | | € 10,00 |
| **Conference material** | | **Quantity** | **Fee** |
|  | Conference folder (with pen, city-map, notepad) |  | € 4,00 |
|  | Pen |  | € 1,50 |
|  | USB flash drive with conference material (order must be at least 20 pieces) |  | € 7,50 |
|  | Layout conference material (Cost provided upon request) |  |  |
|  | Table nameplates |  | € 1,50 |
|  | Nametags with clips |  | € 2,00 |
|  | Nametags with keychain |  | € 2,00 |
|  | Program (printing costs per item)  including one-time layout costs |  | € 1,00  €95,20 |
|  | Poster (printing costs per item)  including one-time layout costs |  | € 1,50  €35,00 |
|  | Flower arrangement (according to budget) |  |  |
| **Merchandise** | | **Quantity** | **Fee** |
|  | Bags (cotton) |  | € 2,00 |
|  | Cup/Mug |  | € 4,00 |
|  | Keychain |  | € 2,50 |
|  | Powerbank |  | €10,00 |

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| **Information** |
| Please send us a short summary of your conference (300 characters) to enable us to confirm whether your conference conforms to the IWH-Symposia-Program. Furthermore, we would like publish the summary on our website if you are in agreement. Please tick the respective box. |
| I hereby agree to the publication of the above summary on the IWH website.  I hereby disagree to the publication of the summary on the IWH website. |