

# Sponsorship Application

Join us as a sponsor and be part of an impactful event experience.



## Review Summary

Please review your information before submitting your application.

### Event

Virtual Medical Education Webinar

### Association

CIN Org.

### Email

info@email.com

### Country / City

Cyprus / ddd

### Alternate airport

-

### Visa support

No

### Support requested

Conference entry, Hotel accommodation

### Motivation

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### Benefit to association/community

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I confirm that the information provided is accurate, that I understand sponsorship remains subject to review and approval, and that I agree to cooperate with TIF and its appointed agents if my application progresses.

Submit Application

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