

INTERNATIONAL CONFERENCE ON PHARMACEUTICAL SCIENCES (ICOPS) 2025 RESPONSE FORM

We wish to take part in the ICOPS 2025 in the following manner:

Sponsorship Packages		Details of Benefit	Rate (RM)	Unit (Quantity)	Total (RM)
1	Platinum sponsor	<ul style="list-style-type: none"> • Full-page advertisement on program book (digital) • Company logo on all promotional materials • 1 booth in the exhibition hallway • 15-minute tea break talk or • Promotional video during the event 	5,000		
2	Gold sponsor	<ul style="list-style-type: none"> • Full-page advertisement on program book (digital) • Company logo on all promotional materials • 1 booth in the exhibition hallway 	3,000		
3	Silver sponsor	<ul style="list-style-type: none"> • Half-page advertisement on program book (digital) • Company logo on all promotional materials 	1,500		
4	Bronze sponsor	<ul style="list-style-type: none"> • Company logo on program book (digital) and ICOPS website 	500		
5	Exhibition booth	<ul style="list-style-type: none"> • 1 booth in the exhibition hallway • Company logo on program book (digital) and acknowledgement on ICOPS website 	2,000		
6	Advertisement	<ul style="list-style-type: none"> • Full-page advertisement on program book (digital) • Half-page advertisement on program book (digital) 	2,000 1,000		
7	Cash contributor	<ul style="list-style-type: none"> • Acknowledgement on ICOPS website 	<ul style="list-style-type: none"> • RM300 • RM400 • Others: please specify _____ 		

Payment could be made by bank transfer and cheque payable to:

“IIUM Kuantan”
Bank Muamalat Malaysia Berhad
Account Number: 06010002738719
Reference: ICOPS 2025

Company Name: _____

Company Address: _____

Telephone number: _____ Email: _____

Contact person: _____ Date: _____

**PLEASE EMAIL THE COMPLETED FORM TOGETHER WITH THE PROOF OF
PAYMENT BY 31st AUGUST 2025 to:**

Secretariat ICOPS 2025, icops@iium.edu.my
 Dr. Muhammad Taufiq bin Mohd Jailani, taufiqjailani@iium.edu.my
 Sr. Nor Amalina binti Ahmad, amalinaahmad@iium.edu.my

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