Please complete all parts of this form and return to the Conferences Department at IPEM.

In order to continuously build and improve our attendance, variety and content and to enable departments time to plan, organise and promote your event we are asking for all 2025 events to be planned as early as possible, but no less than six months before.

Our Mission: Improving health through Physics and Engineering in Medicine

Our Vision: Developing the professional, improving healthcare, transforming lives together

Our Values: Trusted, Inclusive and Progressive

**IPEM Programme Organiser’s Information**

**Name:** *enter name of Programme Organiser*

 *enter name of work organisation*

**Telephone:** *enter phone number*

**Email:** *enter email address*

*Committee/SIG/Member Proposing: enter name of SIG, committee or member proposing event*

**Event Information**

**Title of event:** *enter title of event*

**Summary of event** 200 words max – this will be used for the webpage if event agreed.

Click here to enter text

**Professional Justification for attending event:** To support delegates attendance and requesting budget/time to attend. (areas to consider- technical & personal development, inter-specialism learnings, peer-to-peer exchange, best practice)

**Preferred date – months.**

 enter proposed date(s)

**Type of event** Select all that apply

Mandatory [ ]

Optional [ ]

Research [ ]

Policy / Guidance [ ]

Themed [ ]

Debate [ ]

Panel session [ ]

Other specify

**Preferred platform** [ ]  Online- Webinar

[ ]  Online – Conference

 [ ]  Face to face

Location Preference(s): Click or tap here to enter text.

*(Please note your preferred option cannot be guaranteed)*

**Event duration**

 Number of hours enter number of hours

 Number of days enter number of days

 Number of strands enter number of strands

**Speakers:** Proffered papers [ ]

Invited speakers\*

Local [ ]  National [ ]  International [ ]  Regulators [ ]

Have you identified speakers either person or organisations? Please provide details:

\*there is a cap on # subject to event type & length.

**Audience**

Please list all the disciplines of the target audience

 enter disciplines of target audience

What is the expected number of attendees?

 0-40 [ ]  40-60 [ ]  60-100 [ ]  100+ specify

How is this figure determined?

 Past event [ ]  Guestimate on topic [ ]

 Other specify

To your knowledge, is there an event on the same or a similar topic within 3-6 months before or after the event, either internal or external to IPEM?

Yes [ ]  No [ ]

If yes, specify

**Additional information**

**Sponsorship**

Have exhibitor/industry opportunities been identified?

 Yes [ ]  No [ ]

 If yes, specify

**Partnership organisations**

Are there any proposed/requested partner organisations?

Partner 1

Name of lead enter name of lead

Organisation enter name of organisation

Address enter address

Telephone enter telephone number

Email enter email address

**Potential competition and/or specialism events to avoid**

*Click here to enter text.*

**Additional Comments**

*Click here to enter text.*

Signed: Date dd/mmm/yyyy

Received by Events’ Team: Date dd/mmm/yyyy