***SAF 2025 Sponsorship Application Form***

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| **Sponsorship** |
| Supporting Organization |  |
| Sponsorship Tier | **(Welcome Reception / Platinum / Gold / Silver)** |
| **Side Event** |
| Name of the Event  |  |
| Title |  |
| Organizer(s) |  |
| Contact point | Name: Email: Phone:  |
| Preferred Date(s) |  |
| Preferred Time(s)  |  |
| Use of KCAB Facilities | **(Yes/No)** |
| Format | **(In-person / Hybrid)** |
| Language |  |
| Expected number of participants |  |
| Objective |  |
| Short description of the event (one paragraph / in English only/ within 700 words) |  |

Please fill out the application form and send to **saf@kcab.or.kr**.