



Protocol for bidding for MIDDERMACON

- a. Any state branch wanting to hold MID DERMACON must call its GBM, and, by a majority vote, pass a resolution to that effect and decide the name of the Organizing Chairperson, Organizing Secretary, Treasurer and Chairperson of the Local Scientific Committee. The Organizing Secretary must be from the city where the MID DERMACON is to be held. Ordinarily there shall be one chairperson, but in exceptional situations there can be a Co-Chairperson both for organizing committee and scientific committee. Organizing secretary being the CEO of the conference shall be one only.
- b. Application for the MID DERMACON venue will be invited along with all other applications in IADVL Election Notification and will have same time line

The state branch shall send the bid proposal to host MID DERMACON to the Honorary Secretary General of IADVL two and a half years before the proposed conference only after the above procedure.

- c. The official bid for holding MID DERMACON shall be given to the Honorary Secretary General on the letterhead of the state branch, with the signatures of the President and Secretary of the branch, and the prescribed proforma (containing the details regarding the facilities available in the city and the suitability of the city for hosting MID DERMACON) duly filled in.
- d. The bid for the MID DERMACON of a particular year should be sent to the Honorary Secretary General by 15th June 2022, two and half years before the conference. Eg For MID DERMACON 2024 the bid application should reach by 15/6/2022. The result will be announced in the closing AGBM of that year along with results of elections held that year.
- e. After a careful scrutiny of proposals for venue, all eligible venues shall be included in the ballot paper and the venue shall be selected by election process. If there is only one application for MIDDERMACON, then the team of the President, President-Elect, Past President and Hon. Secretary General shall visit the venue PRIOR TO CCM and report to CCM which meets in August. If the venue is not found suitable for MID DERMACON then the CCM can discuss other options.
- f. All those involved in the conference arrangement, i.e. office bearers, ALL THE KEY OFFICE BEARERS- ORG CHAIRPERSON, SECRETARY TREASURER, SCIENTIFIC CHAIR shall disclose any conflicts of interest, including financial or any other relationships with manufacturers of commercial products (including drugs, equipment, and services) in their presentations on the conference. THEIR CV IN BRIEF INDICATING PREVIOUS CONFERENCE ORGANIZATION EXPERIENCE SHALL BE SUBMITTED ALONG WITH THE APPLICATION.

The bid should be accompanied by tentative project report (provisional budget and possible savings) as per the following proforma:

Proforma for application for MIDDERMACON

1. GENERAL		
A	Name of the conference	
B	Organizing State branch	
C	(i) Organizing CHAIRPERSON/COCHAIRPERSON (ii) Organizing Secretary (iii) Scientific Committee CHAIRPERSON (iv) Treasurer	
D	Proposed City/town (please provide the map).	
E	Was DERMACON/ MIDDERMACON held earlier in the same city/town/STATE? If yes, when? Where? (IF YES, provide details- VENUE, no of delegates, savings TO IADVL etc. in separate sheet)	Yes/No
F	(i) Venue of Conference (Name& Address)	
	(ii) Alternate venue (Name& Address)	
G	Distance from the city center.	
H	Connectivity by (a) train (b) air (c) road. (please give the details like Distance from venue/Hotels etc in a separate sheet).	
	i) Air Connectivity- Airport- Domestic/ International ii) Number of Cities with direct connection iii) International cities connected iv) Distance from Venue	
I	Transport facilities within the city/town.	
J	Were other conferences held earlier in same venue? (If yes, please give details e g Name, attendance etc).	Yes/no

K	Is the venue, a permanent structure Fully? Partially?	Yes/ No
L	Is the venue to be erected?	Yes/No
M	Permanent / Semi permanent Structure (i) Constructed Area (Sq mtr) (a) Purpose (ii) To be erected Area. (Sq mtr) (a) Purpose	
N	To be erected venue- Area (Sq mtr)	

O	Surrounding Locality. (i) Residential (ii) Commercial (iii) Government Offices	
P	Accessibility. (i) Roads- approach roads (including width) and no of entry /exit points (ii) Traffic Density Vehicle parking facility details i) Area :sqM ii) Car holding capacity iii) Whether any permissions required for parking iv) Is the parking area exclusive to the venue or shared	
Q	Please provide figurative diagramS of the conference venue according to scale.	

2. FACILITIES FOR THE SCIENTIFIC PROGRAMS

(A) Venue is Permanent or Semi-permanent Structure		
Total Number of Halls		
a) Auditorium/ Hall for the inaugural function/plenary session		
	(i) Capacity to seat at least 3,000-3,500 people ii) Capacity to seat 800-1000(for MIDDERMACON)	
	(ii) Size of the Podium	
	(iii) Air conditioned or non-air conditioned If not, then provide information for provisions of air conditioning	
	(iv) Acoustics- Whether Proper demarcation between halls is possible to avoid spill over sound	
	(v) Audio-visual facilities (including PPT, Screen and Collar Mike)	
(b) Halls (2-3) for the parallel sessions SHOULD BE 4-6		
	(i) Capacity to seat at least 600-700 people (ia) Capacity to seat 200-300(for MIDDERMACON)	
	(ii) Air conditioned or non-air conditioned	
	(iii) Acoustics Whether Proper demarcation between halls is possible to avoid spill over sound	
	(iv) Audio-visual facilities (PPT, Screen, Collar Mike etc.,)	
	(v) Distance from the main hall	
(c)	Lobby space outside the main hall	
(d)	Space for poster presentations Adequate space	
(e)	TOTAL Toilet for all conference spaces [please mention the nature (Western/ Indian) and number of toilets for each conference space	
(f)	Four (4) smaller halls or spaces (NA for MIDDERMACON)	Yes/No
(g)	Conference Secretariat-AREA	Yes/No
(h)	Registration Area	Yes/No
(i)	Communication room	Yes/No
(j)	Preview Room/S adjacent to the Main Hall	Yes/No
(k)	IADVL Hall – To Seat 300- 400 (NA for MIDDERMACON)	Yes/no

(B)	Area to be erected (Sq mtrs) i) No of Halls with Capacity of each ii) AC/ non-AC iii) Acoustics	
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3. SPACE FOR TRADE EXHIBITION

(A) Total Area (i) Constructed area (ii) To be erected area	
(a) Adequate for 60-70 stalls (3m × 3m)	Yes/No
(b) Three to four bigger stalls (10m × 10m)	Yes/No
(c) Space to move around within the area	Yes/No
(d) Adequate toilet/sanitation facilities (no. of toilets) E) DINING AREA FOR PHARMA	Yes/No

4 Facilities for Delegates and Accompanying persons

(A) Food spaces (area Sq mtrs) (i) To serve at least 750 persons at a time	
(B) Resting area, size and facilities	
(C) “May I help you” counter	Yes/No
(D) Travel desk	Yes/No
(E) Arrangement for safe keeping of delegates’ and accompanying persons’ belongings	Yes/No
(F) Space for Social events and Banquet (i) At venue (ii) Different area. (iii) If yes Distance from Venue. (iv)Transport arrangements from venue.	
(G) Accommodation& Tourist Attractions: (Attach brochures of the tourist department or of the previous conference held)	

5. Hotels & Accommodation facility

Category	No of Hotels	No of rooms	Tariff Range	Approx. distance from Venue
7 Star				
5 Star				
4 Star				
3 Star				
Guest Houses				
Others				

6. Miscellaneous		
(A) Safety Precautions		
I	Emergency Exits	
ii	Adequate and proper firefighting facilities	
iii	Nearest Medical Facility	
iv	Permission and Licenses to be obtained by Authorities	
(B) Adequate manpower		
I	Event management staff- LIST OF THOSE WHO ARE SHORTLISTED	
ii	Residents / medical staff / students (please tick)	

7. Budget		
Expected Income		
i	Registration fees CME	
	Workshop	
	Conference	
ii	Stalls	No of stalls Fees per stall
iii	Expected income	
iv	Others	
V	Sponsorship of scientific sessions	
Vi	Souvenir	
Vii	Sessions	
Viii	Delegate kits	
ix	Seed money from IADVL	
X	Seed money from IADVL State Branch	
Xi	Others	
Expenditure expected under different heads		
i	Venue and infrastructure	
ii	Food and beverages	
iii	Entertainment	

iv	Printing / publicity / postage	
v	Audio visual	
vi	Faculty travel	
vii	Mementos	
viii	Transportation	
ix	Faculty / Officials accommodation	
x	GST	
xi	Administrative expenses	
xii	Central Supervisory committee expenses, free registration for past presidents, prizes	
xiii	Others	
xiv	Seed money to be returned with interest	
xv	IADVL share to be returned- 15% of registration Fees	
xvi	IADVL share to be returned-20% of industry Collection	
	Savings	

8. Details of Organizing Committee

(A)	Organizing Chairperson	
	Name/ LM no	
	Affiliation	
	<p>Experience AS DERMATOLOGIST</p> <p>EXPERIENCE IN TEACHING</p> <p>EXPERIENCE AND CONTRIBUTION IN IADVL</p> <p>Experience in conducting conferences- INDICATE NAME OF CONFERENCE, POSITIONS IN EACH CONFERENCE ORGANIZED WITH YEAR AND CITY</p>	
	Contact Details (Mob No/ E mail ID)	
(B)	Organizing Secretary	
	Name/ LM No	
	Affiliation	

	<p>Experience AS DERMATOLOGIST</p> <p>EXPERIENCE IN TEACHING</p> <p>EXPERIENCE AND CONTRIBUTION IN IADVL</p> <p>Experience in conducting conferences</p> <p>INDICATE NAME OF CONFERENCE,</p> <p>POSITIONS IN EACH CONFERENCE</p> <p>ORGANIZED WITH YEAR AND CITY</p>	
	Contact Details (Mob No/E mail ID)	
(C)	Scientific Committee CHAIRPERSON	
	Name / LM No	
	Affiliation	
	<p>Experience AS DERMATOLOGIST</p> <p>EXPERIENCE IN TEACHING</p> <p>EXPERIENCE AND CONTRIBUTION IN IADVL</p> <p>Experience in conducting conferences</p> <p>INDICATE NAME OF CONFERENCE,</p>	

	<p>POSITIONS IN EACH CONFERENCE</p> <p>ORGANIZED WITH YEAR AND CITY</p>	
	Contact Details (Mob No/ E Mail ID)	
(D)	Treasurer	
	Name / LM No	
	Affiliation	
	<p>Experience AS DERMATOLOGIST</p> <p>EXPERIENCE IN TEACHING</p> <p>EXPERIENCE AND CONTRIBUTION IN IADVL</p> <p>Experience in conducting conferences</p> <p>INDICATE NAME OF CONFERENCE,</p> <p>POSITIONS IN EACH CONFERENCE</p> <p>ORGANIZED WITH YEAR AND CITY</p>	
	Contact Details (Mob No/ E Mail ID)	

We declare that the above information is true and has been authenticated by us.

President
IADVL State (Year)

Secretary
IADVL State(year)

Organizing CHAIRPERSON

Organizing Secretary

Scientific Committee CHAIRPERSON

Treasurer

Place-

Date -

DECLARATION BY BY BIDDING TEAM FOR BIDDING FOR DERMACON /MIDDERMACON

Organizing chairperson, co chairperson, organizing secretary/treasurer /scientific chairperson/co chairperson should submit below form individually

I _____ (LM number _____ date of joining IADVL, date of passing dvd/md/dnb _____) proposed for the post of _____ do solemnly declare my consent to accept the position if appointed. under the Rules and Bye laws of the Constitution of IADVL . I have read the IADVL Constitution, model code of conflicts, election rules and SOPs , and all the relevant articles and SOPs for dermacon/middermacon and will abide by the same in letter and spirit. I confirm that I have been a residing in India for the last- _____ years continuously.

I hereby wish to declare the following conflicts of interests such as associations with industry/other societies/conferences: NIL report is needed specifically for each clause

a) I am an owner/ employee/consultant/advisor /other (specify any other capacity) in the following pharma/aesthetic company/companies or instrument supplier/s/dealer/s or cosmetic company or chain of clinics: List all the entities and number them

Name of company	Position	Term and duration
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b) I am an office bearer in the below mentioned capacities in the following medical associations/societies (mention when the term of office will be over)

Name of Society/association	Position	Term and duration
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c) I am in the following position in organizing committees of the following congresses: mention dates of conferences , Name of conference, position

I CONFIRM THAT ABOVE INFORMATION IS TRUE AND AM LIABLE FOR ACTION INCASE ANY OF IT IS FOUND FALSE

Name

Address:

Mobile number:

Email id:

Enclosures to be attached by state branch secretary:

- 1. Relevant portion of minutes of AGBM where the bid submission was approved- full details of date, type of agbm, venue, quorum should be mentioned.*
- 2. Names of key office bearers, their membership details as above should be mentioned.
Secretary should confirm that the organizing secretary is from the venue city*

