

Sponsor Application Form

Organization Name _____ Contact Person _____

Mailing Address _____

City _____ State _____ Zip _____ Country _____

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E-Mail Address _____ Website Address _____

OFFICE USE ONLY CEIS #119908 Customer ID _____ Receipt # _____

1. SPONSORSHIP LEVELS (Please select one)

PLATINUM \$20,000 GOLD \$15,000 SILVER \$10,000 BRONZE \$5,000

2. Additional Sponsorship Opportunities

All promotional items below are available on a first come-first served basis. Before sending payment, please inquire about availability with Kate Stottle at the MU Conference Office; StottleK@missouri.edu; 001-573-882-9551.

- Welcome Reception (1 of 5 sponsors)
- Poster Session (1 of 3 per session)
- Coffee Breaks (1 of 5)
- Pens
- Notepads
- Name Badge Lanyards
- Leaflet in Conference Bag

Item of Interest _____ Agreed Upon Donation \$ _____

TOTAL ENCLOSED of above Sponsorship \$ _____

I hereby authorize ISRS 2015 to reserve exhibit space and agree to sponsor the 21st International Symposium on Radiopharmaceutical Sciences.

Company Authorized Signature: _____

Name (Printed): _____ Date: _____

Payment Methods

Deadline for sponsorship registration and payment is **March 11, 2015**. Please register early as **sponsorship opportunities are limited**.

MAIL or FAX form and payment to:

ISRS 2015 - MU Conference Office
344 Hearnes Ctr.
Columbia, MO 65211 USA

FAX: 001-573-882-1953

Please make check payable to: **University of Missouri**

WIRE TRANSFER

Email: manganoe@missouri.edu
to arrange and receive banking information.
PHONE: 001-573-882-9551

Invoice requested; payment will follow.

Credit Card Information

Visa MasterCard Discover Amex

Card Number _____ Exp. Date _____ / _____

Card Holder _____ Signature _____

Address _____