INDUSTRY-SUPPORTED SYMPOSIUM APPLICATION

September 14-16, 2018 / The Westin Peachtree Plaza / Atlanta, Georgia

		Name of	Accrediting Organization
Sponsoring Company Name		Contact Name	
Address	City	State	Zip
Phone	Fax	Email	
Brief Description of Symp	osia Topics and Propos	ed Faculty:	
* Symposium acceptance is subject to	final approval by the SPU Scientific	Program Committee	
FUNCTION TYPE & PRI	ICING: Breakfast: \$5	,000 Lunch:	\$10,000
DAY/DATE/TIME OF ME (check one) Friday, September 12:00 pm - 1:30 pm \$10,000.00	1 <u>4*</u>		Saturday, September 15* ☐ 6:00 am - 7:45 am, Breakfast \$5000.00 ☐ 12:15 pm - 1:30 pm, Lunch \$10,000.00
* Times and availability are sub	oject to change based on til	nai program	
electrical/ telecommunications	and labor are not included	in the fee. Each spons	ontact with a catering representative. Catering, special set fees, AV, sor is responsible for all charges to the facility. By signing below you as.
	and labor are not included	in the fee. Each spons	or is responsible for all charges to the facility. By signing below you a
electrical/ telecommunications authorizing SPU to charge the Signature PAYMENT METHO WIRE TRANSFER – Pleas	and labor are not included total fee indicated on this form. DE: e call our offices at +978.9	in the fee. Each spons orm to your credit cards	or is responsible for all charges to the facility. By signing below you as: Date
electrical/ telecommunications authorizing SPU to charge the Signature PAYMENT METHO WIRE TRANSFER – Pleas	and labor are not included total fee indicated on this form to the indicated on the form total fee indicated on the fee in	in the fee. Each spons orm to your credit cards	for is responsible for all charges to the facility. By signing below you as. Date
electrical/ telecommunications authorizing SPU to charge the Signature PAYMENT METHO WIRE TRANSFER - Pleas Check amount enclosed: \$ CREDIT CARD	and labor are not included total fee indicated on this form. D:: e call our offices at +978.9	in the fee. Each spons orm to your credit cards	Date Do NOT EMAIL full credit card information. Form must be faxed if credit card number is showing via our secure fax 978.524.0461. If you
electrical/ telecommunications authorizing SPU to charge the Signature PAYMENT METHO WIRE TRANSFER – Pleas Check amount enclosed: \$	and labor are not included total fee indicated on this form. D:: e call our offices at +978.9	in the fee. Each spons orm to your credit cards	Date Do NOT EMAIL full credit card information. Form must be faxed if credit card number is showing via our secure fax 978.524.0461. If you prefer to email please leave out the credit card number and provide a phone number and we will
electrical/ telecommunications authorizing SPU to charge the Signature PAYMENT METHO WIRE TRANSFER – Pleas Check amount enclosed: \$ CREDIT CARD Amount to be charged: \$ Credit Card Number	and labor are not included total fee indicated on this form. D:: e call our offices at +978.9	in the fee. Each spons orm to your credit cards 27.8330 for wiring info	Date Do NOT EMAIL full credit card information. Form must be faxed if credit card number is showing via our secure fax 978.524.0461. If you prefer to email please leave out the credit card number and provide a phone number and we will

<u>Complete and return to</u>: Yvonne Grunebaum, Director of Industry Relations | PUNS

500 Cummings Center, Suite 4400

Beverly, MA 01915 USA | Phone: 978-927-8330 | Fax: 978-524-0461