

# 4<sup>th</sup> Annual Life Sciences Career Development Conference

*Building Successful Industry-University Partnerships  
Careers, Collaborations & Contracts*  
**2005 Sponsor Registration Form**

**Client Information:**

Organization/Company Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ Web Site Address \_\_\_\_\_

Key Contact Person \_\_\_\_\_ Title \_\_\_\_\_

E-Mail Address \_\_\_\_\_ Assistant/Alternative Contact \_\_\_\_\_

Authorized Signature \_\_\_\_\_

**Commitment:**

Sponsorship Level

Platinum       Gold       Silver       Bronze       Other

Please make checks payable to IFR#900082 and mail to:

The Center for Biotechnology  
Attn: Kate Posnanski  
Psychology A Building – 3<sup>rd</sup> Floor  
Stony Brook University  
Stony Brook, NY 11794-2580

**Sponsor Responsibilities:**

- Organization/Company Description: Please provide a 100 word or less company description to be included in the program listing. Please send via email to [kposnanski@notes.cc.sunysb.edu](mailto:kposnanski@notes.cc.sunysb.edu) or by fax 631-632-8577 by 9/15/05
- Please provide an EPS format of your logo to [kposnanski@notes.cc.sunysb.edu](mailto:kposnanski@notes.cc.sunysb.edu) by 9/15/05
- All ads for the conference program must be received by 9/15/05.

\*Submitting all materials by the needed deadline is the sponsor's responsibility. Conference organizers will not be held responsible for material not received by the specified deadline. Conference organizers reserve the right not to include the submitted material.

**Accounts Payable:**

Contact Name \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Please return completed application to [kposnanski@notes.cc.sunysb.edu](mailto:kposnanski@notes.cc.sunysb.edu) or fax to 631-632-8577.  
For questions please call 631-632-8521

**For Office Use Only**

Date Received \_\_\_\_\_

Amount \$ \_\_\_\_\_

Check Number \_\_\_\_\_