

Academic Showcase Registration Form

2004 ISPE ANNUAL MEETING

Bordeaux Conference Center, Bordeaux, France

22 August 2004

6:30pm-8:00pm

Our program would like to participate in the Academic Showcase on 22 August 2004. As a participant, we will receive:

- High profile signage at the Welcome Reception
- Special colored ribbons for program representatives indicating our status as an academic supporter
- Complimentary table space at the reception for program handouts. (An exhibit booth may be purchased at a special rate.)
- Listing in the Final Programme and on ISPE website

PRINT or TYPE

Contact Name: _____

Mailing Address: _____

Telephone: _____ Fax: _____ Email: _____

PAYMENT: ISPE Academic Program - \$250.00(US) Non-Member - \$600.00 US

Check enclosed.

Payment by Credit Card

Please complete the information below.

VISA

MASTERCARD

AMERICAN EXPRESS

ACCOUNT NUMBER: _____

EXP. DATE: MONTH ___/YR ___

SIGNATURE: _____

Credit Card Reservations fax to: (301) 656-0989

All others mail to:

ISPE, 4350 East West Highway, Suite 401, Bethesda, MD, 20814, USA,

ATTN: Welcome Reception

ISPE Federal Tax Number: 41-1688677

NOTE: 2004 Annual Meeting registration is separate.