

**National Lipid Association
2010 CME Satellite Symposium Application**

Please complete all information below and email to lwotto@lipid.org. Applicants will be contacted regarding acceptance approximately 6-8 weeks after receiving the application.

Organizing Company Name: _____

Contact Person: _____ Title: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____ E-Mail: _____

Commercial Supporters (if confirmed at time of proposal):

CME/CE Provider Name: _____

Proposed Title of Symposium: _____

Target Audience: _____

Proposed Symposium Objectives/Performance Gaps Addressed: _____

Proposed Faculty and Topics (Agenda): _____

INVOICE FOR PAYMENT:

Same as Primary Contact Information

Company Name: _____

Contact Person: _____ Title: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____ E-Mail: _____

Please check the date and time slot that you are applying for:

NLA Annual Scientific Sessions (Chicago, IL):

Breakfast Symposium:

May 16 • \$10,000

Dinner Symposium:

May 13 • \$15,000

May 14 • \$15,000

Regional Clinical Lipid Updates:

Winter Dinner Symposium (San Francisco, CA): February 19 • \$10,000

Spring Dinner Symposium (Washington, DC): August 27 • \$10,000

By signing this application, you have read and agree to the following guidelines, disclaimer and the timely payment of all fees:

Disclaimer

*NLA is not responsible for unsatisfactory attendance and/or marketing of Industry-Supported Satellite Symposia. It is the responsibility of the Organizer to market this event.

**Times are subject to change- final symposium times will be based on final agenda

Return to:

Meetings Department
National Lipid Association
6816 Souhtpoint Parkway Suite 1000
Jacksonville, FL 32216
Phone: 904.998.0854
Fax: 904.998.0855
e-mail: sympo@lipid.org