



IUPAC 2011 CONFERENCE SPONSOR AGREEMENT

Company Name (please print): _____
Officer Name and Title: _____
Address: _____
City, State Zip: _____
Web Site: _____
Phone: _____ Fax: _____
Email: _____

COURSE AND CONFERENCE DESIGN GUIDE

Title: _____
Short abstract: _____

Author(s) or Speaker(s): _____
Telephone/Fax: _____
Email: _____

Type of activity: _____ Course _____ Conference _____ Symposium
of contact hours: _____ **Level:** _____ Basic _____ Intermediate _____ Advance

Who should attend? _____

Note: Basic *Audiovisual Equipment* needed for the presentation will be supplied by IUPAC 2011.

_____ Overhead Projector _____ Slide Projector _____ Screen

Additional *Audiovisual* needed to be provided by presenter:

_____ Radio/Cassette/CD _____ Data Projector _____ TV _____ VCR

Other: _____

Equipment to be supplied by you: _____ Yes _____ No

Due date for submission: **February 15, 2011**

ADDITIONAL REMARKS:

1. Include a preliminary handout of the presentation with the curricular design. The final copy of the presentation must be send to the Colegio de Químicos of Puerto Rico in accordance to the conference sponsored contract.
2. Include with this form the curricular design of the presentation. Please, be careful with the requirements of size and page quantity where is specified.
3. Submit the abstract by e-mail to education@iupac2011.org or send CD by regular mail to: Colegio de Quimicos; 52 Hatillo St., San Juan, PR 00918.

AGREEMENT

The Organization or Company agrees to comply with the Rules and Regulations of IUPAC 2011 as described in the corresponding brochure, and to assure that all documents are forwarded to the Colegio de Químicos de Puerto Rico by the established dates and that the conference or courses to be presented will be of a high technical level.

A penalty will be charged for "no shows" to reimburse CQPR and IUPAC 2011 for expenses incurred including attendees who are enrolled in the courses and for conference room costs. The penalty will be calculated by the IUPAC 2011 based on actual data.

Finally, I understand that the CQPR Continuing Education Committee and the Puerto Rico Chemist's Examining Board retain the right to recommend and accredit, respectively the conference, symposia or courses submitted by your Organization or Company.

CANCELLATION POLICY:

There will be **50%** cancellation charge of the total cost contracted if any part of this contract is cancelled **before February 28, 2011**. If cancellation is made after this date, but **before April 30, 2011**, there will be 75% cancellation charge. **After April 30, 2011** no refund will be granted. IUPAC 2011 reserves the right of cancel any commitment or Contracts if the Company fails to comply with Rules and Regulations.

PAYMENT AGREEMENT:

The Company and IUPAC 2011 set the following payment schedule: Deposit of **50%** upon agreement signature and the Final **50%** payment on **May 2011**.

I hereby state that, I understand and agree that this agreement will be invalidated if our company does not comply with the above Payment Agreement or the rules and regulations. I also understand that the cancellation policy continues to apply.

Conference cost: \$1,000 for every 4 hour of contact time.

Payment Calculation:

Contact hours: (___ / 4) X \$ 1,000 = \$ _____ Total amount of agreement

Date: _____ **Authorized Signature** _____

Please print name: _____ **Total payment due:** _____

Make checks payable to: **IUPAC 2011 Congress**

Payment information

Check #: _____ **Date:** _____ **Amount: \$** _____

Credit Card #: _____ **Expiration date:** _____

Send agreement & payment to: **Certification:**

IUPAC 2011
Colegio de Quimicos de PR
52 Hatillo Street
San Juan, PR 00918

Agreement was received and accepted by IUPAC 2011.

Comments:

Fax: 787-758-2615 USA

Congress Manager or Treasurer

Date