

MSACL 2019 US – Educational Travel Grant Sponsorship

Support Educational Development in Clinical Mass Spectrometry

Sponsor:	
Contact Name:	Email:
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<p>Description</p> <p>MSACL Educational Travel Grants support the conference attendance of:</p> <p>(1) Trainees: those on track to lead a clinical laboratory who are keen to learn more about the pros and cons of mass spectrometry versus conventional methodologies, and</p> <p>(2) Lab Directors: those who are leading clinical labs and want to learn more about how mass spectrometry can assist in improving result outcome.</p>	
<p>Sponsorship Benefits</p> <ul style="list-style-type: none"> • Your company logo will be placed in the Conference Program as a Travel Grantee Supporter. • Your company logo or name (text), depending on the level of support, will be placed in the Travel Grant Support box at the top of each MSACL 2019 US webpage. 	
<p style="text-align: center;"><i>Sponsorship Amount</i></p> <p><input type="checkbox"/> \$2,000 <input type="checkbox"/> \$4,000 <input type="checkbox"/> \$6,000 <input type="checkbox"/> \$8,000</p> <p><input type="checkbox"/> \$10,000 <input type="checkbox"/> \$14,000 <input type="checkbox"/> \$20,000 <input type="checkbox"/> \$22,000</p> <p><input type="checkbox"/> \$_____ (Other amount)</p> <p>(Optional) Please use my contribution to support:</p> <p><input type="checkbox"/> Trainee Grants at an amount of \$_____</p> <p><input type="checkbox"/> Lab Director Grants at an amount of \$_____</p>	<p>Payment is by Check or Credit Card (CC) or Bank Transfer.</p> <p><input type="checkbox"/> If paying by CC complete Authorization below.</p> <p><input type="checkbox"/> If paying by Check, make payable to "MSACL".</p> <p><input type="checkbox"/> If paying by Bank Transfer, bank information will be on the invoice you receive after you submit this application.</p>
<p>Name on CC: _____</p> <p>Email: _____ Phone: _____</p> <p>I authorize MSACL to charge the credit card listed for the amount listed. Signature: SIGN HERE FOR CC Purchase</p> <p>CC Authorization: <input type="checkbox"/>MC <input type="checkbox"/>VISA <input type="checkbox"/>AMEX Credit Card #: _____ Exp Date: _____</p>	

Questions: 858-922-5813
 Fax to: 858-876-1873
 Email to: chris.herold@msacl.org

Mail to: MSACL
 205 12th St
 Del Mar, CA 92014