

### SPONSORSHIP AGREEMENT N° xxxx/x/IUPAB

# **AGREEMENT BETWEEN:**

# **SPONSOR**

**EVENT ORGANISER** 

to fill in

IUPAB, represented by Professor John Baenziger IUPAB Treasurer Dept. of Biochemistry, Microbiology and Immunology Faculty of Medicine, University of Ottawa, 451 Smyth Road Ottawa, ON K1H 8M5 Canada Tel: (613) 562-5800, Ext. 8222 Email: john.baenziger@uottawa.ca

# **EVENT DETAILS**

name, location, dates etc.

### DESCRIPTION

Contribution of US\$ XXX to be used to support the travel and living costs of students participating to the above mentioned scientific event.

The organizers will:

- Display the IUPAB logo on the conference webpage and acknowledge IUPAB financial support on all documents
- Display the IUPAB logo on the program and all related documents
- Follow the guidelines of IUPAB for the use of funds and financial reporting of reimbursement of expenses for selected participants

Signed by:

fill in and sign

Professor John Baenziger **IUPAB** Treasurer Dept. of Biochemistry, Microbiology and Immunology. Faculty of Medicine. University of Ottawa. 451 Smyth RoadOttawa, ON K1H 8M5 Canada.Tel: (613) 562-5800, Ext. 8222. Email: john.baenziger@uottawa.ca

date:

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