# Application form for event sponsoring

**Please fill in the following questionnaire and send it back by email to   
info@phospholipid-research-center.com.**

**Your PRC member number**

Please add your PRC member number.

Member number

**Personal information**

Mr.  Ms.  Add.  Dr.  Prof. Dr.

Insert your first name. Insert your last name.

First name Last name

**Institute or company information**

Insert your institute or company.

Institute or Company

If applicable, add your department, lab or division.

Department, lab or division

Please add street and number. Add your daytime phone number.

Street / Number Daytime phone number

Please add Zip and city. Add your primary email address.

Zip / City Primary email

Please add your country. If applicable, add your webpage.

Country Webpage

**Phospholipid Research Center** Mail: info@phospholipid-research-center.com

Im Neuenheimer Feld 515 Phone: +49 (0)6221 5888360

69120 Heidelberg, Germany Web: www.phospholipid-research-center.com

**Your event proposal**

Please add the date of the event. Add the estimated number of participants.

Date Number of participants

Please add the location of the event. Add the expected total costs.

Location Expected TOTAL costs in EUR

Add the costs covered by the PRC.

Expected costs in EUR covered by the PRC

|  |
| --- |
| Please add a summary of your event. You can use this page.  Theme/Purpose |

Please add place and date.

Place, Date Signature

|  |  |
| --- | --- |
| **To be completed by the Phospholipid Research Center** | |
| Certified and approved  Rejected | Date, Signature |