**ESB Endorsement Committee**

**Request for Endorsement for Conferences/Workshops**

**Please submit your request at least three months in advance of the conference.**

|  |  |
| --- | --- |
| This request is for (name of society/organization): |  |
| Date of Request: |  |
| Event Title: |  |
| Event Theme: |  |
| Date(s) of Event: |  |
| Location of Event: |  |
| Event Website: |  |

|  |  |
| --- | --- |
| Contact Person: |  |
| Affiliation: |  |
| Address: |  |
| City/Zip Code: |  |
| Country: |  |
| Telephone: |  |
| E-mail: |  |
| Name of the ESB Sponsoring Member:  (Letter to be included) |  |

**Summary:**

*Please provide the purpose of the meeting, the potential number of attendees, the number of sessions, the number of expected abstracts, keynote speakers, invited speakers, session topics, a preliminary program, registration fees and reduction for students, etc.*

*Please explain how the meeting will be of interest and/or benefit to the ESB membership. Also this form should be accompanied by a letter of support from a ESB member.*

*Please send a copy of the preliminary program and other relevant information from the previous meeting(s) to the ESB Secretary (*[*secretary@esbiomaterials.eu*](mailto:secretary@esbiomaterials.eu)*). The request will be provided to the ESB Council for review and consideration of endorsement.*