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| **Mini Symposium Proposal** |

To submit your proposal, complete the form below. For planning purpose, we ask that you also supply an estimated number of abstracts and attendance. Please note this is only an estimate.

**1) Mini symposium Title:**

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**2)Conference Title:**

 

**3) Organizer(s) Information:**

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| --- | --- | --- |
|  | **MS Organizer** |  **Co-organizers (if you have any)** |
| First Name |  |  |
| Last Name |  |  |
| Affiliation |  |  |
| Email address |  |  |

**4) Mini symposium Description:**

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**5) Anticipated number of abstracts/attendees:**

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