

INDIAN MEDICAL ASSOCIATION OF NEW ENGLAND

Intent To Sponsor Form

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All correspondence will be with the contact person listed above, who is responsible for forwarding all materials to agents and/or representatives.

Reminder: Effective July 1, 2009, Massachusetts Department of Public Health regulations on the "Ban on Gifts to Physicians" took effect. NEOS recommends that all potential exhibitors review this information at www.mass.gov/dph/pharmamed in advance of their onsite presence.

Signature: The Sponsor agrees to abide by all conditions and regulations as set forth in the Agreement for Commercial Support and gives IMANE permission to use (check all that apply) for promotional purposes:

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Please email, fax or mail this completed form to: IMANE@mms.org

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