# *SIOP Endorsed Meeting*

# *APPLICATION FORM*

**1. General description and contact details**

|  |  |  |
| --- | --- | --- |
| 1 | **Country** |       |
| 3 | **Venue** |       |
| 4 | **Name of the meeting** |       |
| 5 | **Date** |       |
| 6 | **Expected number of participants** |       |
| 7 | **Local Organizer (LO)****(Society/ Institute)** |       |
| 8 | **Contact person****(address, tel/fax, e-mail)** |       |

**2. Scientific Program**

**Preliminary Scientific Program** is a requested part of the application. Kindly attach the program to your application in PDF or Word format.

**Invited speakers (kindly provide us with a list of the invited speakers below):**

Speaker/Topic 1:

Speaker/Topic 2:

Speaker/Topic 3:

Others:

**3. Are you a SIOP member (please indicate with yes or no?):**

*Become an SIOP member now –* [*click here*](http://www.siop-online.org/page/membership)

**4. Deadline for applications:** applications are accepted year round

Applications should be submitted to SIOP Office info@siop-online.org by email only.