AUDIOVISUAL EQUIPMENT REQUEST FORM

16th International Symposium on the Autonomic Nervous System
October 6-9, 2005

Please check the appropriate box below.

Fax or e-mail this form by September 1, 2005, to:
Eduardo Medina, Project Manager, Westin Resort & Spa Los Cabos:
projectwestin@presentationservices.com.mx
Phone: 52-624-142-9089
Fax: 52-624-142-9040

Speaker name:______________________________________________________
Title of presentation:_________________________________________________
Date and time of presentation:___________________________________________

O OVERHEAD PROJECTOR

O VIDEO RECORDER          O VHS
                              O Umatic
                              O Other……………………..

O DATA PROJECTOR for Powerpoint presentation. I will use the Westin laptop (Windows XP). Please take note that, due to the tight schedule, it is not possible to use your own laptop.

You can send your presentation (as we strongly advise) before the meeting to projectwestin@presentationservices.com.mx, so it can be installed on the computer. Please mention your name, title and date/time of presentation.

O Yes, I will send my presentation to: projectwestin@presentationservices.com.mx

O OTHER         O .............................................
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