



2013 Siemens Preclinical Solutions Image of the Year Competition

Image Submission Form Submission Deadline: Friday, July 26, 2013

Submission/Image Name: _____

Institute Name: _____

(Please submit institute name as it should be presented.)

Address: _____

City & State/Province: _____

Country & ZIP/Postal Code: _____

Investigator's Name(s): _____

(Include all investigator names as you would like to have them presented.
The first name listed will be considered the primary contact)

Telephone Number: _____

(Note: Enter the phone number, including country code, of the primary contact listed above)

Email: _____

(Note: Enter the email address of the primary contact listed above)

Willingness to provide additional data:

If requested by Siemens, I am willing to submit raw list mode data for the emission, transmission, blank and normalization used in this study, as well as other data collected (i.e., blood sampling, CT scan, etc.).

Yes No

Permission to use submitted data:

Your submission of any images or other materials (the "Materials") in response to this request for your participation will constitute your unqualified consent to allow Siemens to use, with no time or use limitations, all such Materials in whatever manner it chooses, including but not limited to displays in Siemens brochures, websites or multimedia presentations, and any other commercial, marketing or general business uses. Your submission of the Materials will also be your representation to Siemens that you have full right and authority to give such unqualified consent, as well as your agreement that Siemens will have no obligation to return any Materials submitted. Siemens does request that you return this letter, however, signed by your authorized representative, for its files, and reserves the right not to consider for evaluation any submissions not accompanied by the signed copy.

Please sign and return by mail with image submission no later than **Friday, July 26, 2013**. To participate in the 2013 Siemens Preclinical Solutions Image of the Year Competition, an authorized signature on this submission form is required for each image entry.

Authorized Signature

Date

Print Name & Job Title/Professional Designation

For office use only

Date Received: _____ Submission #: _____