Join us on Thursday, March 28th, 2019 from 5:00 - 8:00 PM at La Jolla Pharmaceutical Company as the ISPE San Diego Chapter hosts a special opportunity for ISPE Members, nonmembers, and young professionals to get an updated headshot by one of San Diego’s best professional business photographers and enjoy some food, drinks, and networking with industry colleagues.

Then, hear from ISPE San Diego Chapter Board Member & Marketing Communications Chair, Francis Cappello, Worldwide Influencer & Visionary Thought Leader, on how he is inspiring a new generation of life science professionals as he delivers his keynote speech “THE POWER OF YOUR PROFILE!”

Learn how to work smarter not harder through using social media, creating value in content, and the basics of building a brand to help you highlight your competitive advantage in a digitalized world of virtual reality, artificial intelligence, and automation by boosting your professional profile for career success on the #1 business networking site in the world.

Location:
La Jolla Pharmaceutical Company
4550 Towne Centre Court
San Diego, CA 92121
Registration Instructions
LinkedIn: Boost Your Professional Profile March 28, 2019

Sponsorships Available

To Register and Receive an immediate receipt, use our on-line registration:  http://atdevents.net/register.php

ISPE LA, SD, SF Members: If you are an ISPE Member in California, please do not set up a new account, you should already be in our system. Please email Rob Fleming for assistance with your username and/or password.

ISPE Members of other Chapters: You will not be in our system unless you have previously set up an account. Please follow instructions for Non Members below. To update your account to a Member account, please forward your confirmation email from ISPE or ISPE Membership Card to Rob Fleming. We need your Chapter name, your ISPE Member number and expiration date. You can get your Membership card once logged onto the ISPE website (see bottom left side of the screen).

Non Members: If you do not have an account on our system, you can set one up on the site using letters (not numbers) as your username.

**Students:** The Student Rate is for individuals who are enrolled full time in a related academic program at an accredited institution. The Student Rate does not apply to working professionals taking one or two courses on the side. To verify your status as a student, we may ask you to supply your student ID and copy of current class schedule. Final eligibility determined by ISPE SD.

Registrations can also be faxed. Complete the form and fax to 949-266-8461.

If paying by check, please mail your check made payable to: ISPE San Diego Chapter, 5319 University Dr., Suite 641, Irvine, CA 92612. Tel: 949-387-9046. Tax ID#33-0551783.

Registration Fee Includes lunch and free parking
$70 ISPE Members
$100 Non-Member
$30 Young Professional and Student ISPE Members
Sponsors $500 (includes two attendees)

Note: If you are between jobs or your company does not support your registration fees, please contact Kimberly Syre (ksyre@cox.net) for reduced fee options or sponsorship opportunities.

Registration or Online Questions? Contact Rob Fleming:  rob.fleming@yahoo.com
Any other Questions, Contact Kimberly Syre: ksyre@cox.net
Name Badges will be given at the event.

Cancellations must be received via email to: rob.fleming@yahoo.com by March 20, 2019 for refund. After the cancellation date if you have reserved a space but do not attend, your payment MUST be remitted, however, an alternate person may attend in your place. If the alternate is not a member, they will need to pay the additional amount for non-members. Name badges will be given at the on-site registration desk.
Registration Form
LinkedIn: Boost Your Professional Profile
March 28, 2019

REGISTRATION RATES

$70  ISPE Members
$100  Non-Members
$30  Young Professional or Students ISPE Members
$500  Sponsors (includes two attendees)

Please list the name of your attendees:__________________________________________

CREDIT CARD PAYMENT - Please Indicate Type of Credit Card

VISA  MASTERCARD  AMERICAN EXPRESS

Name on Card: ________________________________ Signature: __________________________

Credit Card #: ________________________________ Exp Date: __________

YOUR CONTACT INFORMATION:

First and Last Name: __________________________________________________________

Title: ________________________________________________________________

Company: ______________________________________________________________

Address: ______________________________________________________________

City: __________________________ State: ______ Zip: __________

E-Mail: ________________________________________________________________

Phone: __________________________ Cell: ________________________________