UCSD CONNECT
where entrepreneurs come for results

BBDC
Biotech Business Development CONNECT
Networking Reception

Radisson Hotel La Jolla, 3299 Holiday Court, La Jolla, CA 92037
Wednesday, May 22, 2002, 5:30 PM - 7:30 PM

Biotech Business Development CONNECT (BBDC) would like to invite you to attend a networking reception on Thursday, May 22, 2002 from 5:30 p.m. - 7:30 p.m. at the Radisson Hotel La Jolla. The registration fee is $30.00 for BBDC members, $75.00 for non-BBDC members, which includes beverages and hors d'oeuvres.

Register by Monday, May 20, 2002 by filling out the attached registration form and returning it, along with payment, to UCSD CONNECT. If you have further questions you may call CONNECT at 858-964-1300 or email connectinfo@ucsd.edu.

For those of you not yet a member of Biotech Business Development CONNECT, BBDC is organized as a membership program within CONNECT for CONNECT members. The annual $100.00 membership fee is used to defray CONNECT's cost for administration. Members receive discounted registration for all functions, announcements of upcoming biotech events, and great networking opportunities. Membership is available only to business development professionals within CONNECT member companies. Non-members may attend events at a higher cost on a space available basis. To become a member, please contact Karen Cordero at kcordero@ucsd.edu.

REGISTRATION INFORMATION:
BBDC MAY 22ND AT THE RADISSON HOTEL LA JOLLA, 3299 Holiday Court, La Jolla, CA 92037
FEE: $30 BBDC MEMBERS / $75 non-BBDC Members
(No refunds after May 15, 2002. Cash will not be accepted the day of the event)
To register, fax your registration and payment info to 858-964-1301 or mail to the address listed below.

Name: _____ Title: _____

Company: _____ E-Mail _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

PAYMENT INFORMATION: Total Fee: $_____ **(Make checks payable to: UC Regents/CONNECT)**
Fax Registration to: 858-964-1301
Mail checks to: UCSD CONNECT, 9500 Gilman Drive, MC 0170C, La Jolla, CA 92093-0170

☐ Check Enclosed   ☐ Visa*   ☐ MasterCard*   ☐ Discover*

Name on Card: _____

Card Number: _____ Exp. Date: _____

Authorized Signature: _____

*The charge will show as "UCSD-ESPP" on your credit card statement.