



CooperSurgical 2010 SpotLight AwardsSM Program Entry Form

Please be sure to fill out all fields and sign before submitting. Video and Documentation should be sent using a carrier that provides delivery confirmation to:

CooperSurgical, Inc.
ATTN: P. Arneson, SpotLight Awards Program
95 Corporate Drive
Trumbull, CT 06611

Entrant's Information: (Please print clearly – this is the name that will appear on the award)

Name: _____

Address:

Business Name: _____

Street/Suite: _____

City: _____

State/ZIP: _____

Phone: _____

E-mail: _____

Video Information: (Please print clearly)

Title: _____

Procedure: _____

Length (min.): _____

Video Format: _____

Institution where video filmed: _____

Entry Checklist:

- Video
- Spotlight Awards Intellectual Property Agreement (Include two signed copies)

I acknowledge that I have read the Official Rules and that my submission complies with all the requirements set forth therein:

Entrant's Signature

Date

