



PROMOTING THE GLOBAL SCIENCE AND ENGINEERING PROFESSIONS CONCERNED WITH MINERALS, METALS AND MATERIALS

Request for TMS-partnered Specialty Meeting

A TMS-partnered specialty meeting is an event conducted by TMS and one or more additional organizations that requires some degree of support by TMS staff and/or volunteers and that possesses an element of financial risk and reward for the society. To be considered for TMS co-sponsorship, an event must have technical relevance to the TMS audience and aid in fulfilling the TMS mission to promote the global science and engineering professions concerned with minerals, metals and materials.

If approved as a TMS-partnered specialty meeting, TMS will:

1. Require clearly defined financial responsibilities and accounting schedules.
2. Provide (or not provide) to the degree defined in the agreement event management, inclusive of, but not limited to, on-site management, contracting vendors, arranging housing and event space, and developing and executing marketing and promotional tactics.
3. Provide (or not provide) to the degree defined in the agreement coordination of the efforts of staff, volunteers, and partner organizations in the development of the technical programming, proceedings, short courses, exhibition, and/or special event content as applicable.
4. Provide (or not provide) to the degree defined in the agreement meeting participants use of ProgramMaster and the Personal Conference Scheduler
5. Encourage participation in the conference by its members and other contacts.
6. List the conference via the TMS web site, inclusive of a link to the event web site.
7. List the conference in the Meetings Calendar of the society journal, *JOM*, and the society e-newsletter, *TMS e-News*.

To have a conference considered as a TMS-partnered specialty meeting, please provide the following information:

Name of conference: _____

Dates: _____ Location: _____

Lead organizer / primary contact name: _____

Company/Affiliation: _____

Address: _____

E-mail: _____ Telephone: _____ Fax: _____

Please list all other sponsoring organizations

Organization: _____ Contact Name: _____

Address: _____

E-mail: _____ Telephone: _____ Fax: _____

Organization: _____ Contact Name: _____

Address: _____

E-mail: _____ Telephone: _____ Fax: _____

Organization: _____ Contact Name: _____

Address: _____

E-mail: _____ Telephone: _____ Fax: _____

PLEASE SUBMIT TO:

TMS MEETINGS MANAGEMENT

E-MAIL: mtgmt@tms.org

FAX: (724) 814-3111

TELEPHONE: (724) 814-3110

184 THORN HILL ROAD
WARRENDALE, PA 15086-7514
USA



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Organization: _____ Contact Name: _____

Address: _____

E-mail: _____ Telephone: _____ Fax: _____

Additional conference organizers

Name: _____ Company: _____

Address: _____

E-mail: _____ Telephone: _____ Fax: _____

Name: _____ Company: _____

Address: _____

E-mail: _____ Telephone: _____ Fax: _____

Name: _____ Company: _____

Address: _____

E-mail: _____ Telephone: _____ Fax: _____

Please select TMS technical division(s) and/or technical committee(s) requested to provide support:

- Electronic, Magnetic & Photonic Materials Division
- Extraction & Processing Division
- Light Metals Division
- Materials Processing & Manufacturing Division
- Structural Materials Division
- Technical Committees (list) _____

Technical Scope _____

Program Outline _____

Planned social event schedule _____

Projected Audience _____

Projected number of attendees _____

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Is a published proceedings planned ? yes no

If so, what format? CD-ROM hardbound volume hardbound volume / with CD-ROM
 journal special issue (include journal title: _____)
 online publication

Is this meeting an installment in a series? yes no
(If yes, please provide the following details on the most recent previous meeting:)

Location: _____ Dates: _____

Primary sponsor(s): _____

Number of attendees: _____

Was the proceedings published? yes no Number sold _____

Do you know of any other events on this topic in the last/next two years? yes no

If yes, please list

Name: _____

Location: _____ Dates: _____

Primary sponsor(s): _____

Name: _____

Location: _____ Dates: _____

Primary sponsor(s): _____

Name: _____

Location: _____ Dates: _____

Primary sponsor(s): _____

Please provide additional information as appropriate regarding other unique features of the event, such as exhibits, webcasting, keynote presentations, etc.:

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USA

Signature: _____ Date: _____

Company/Affiliation: _____

Address: _____

E-mail: _____ Telephone: _____ Fax: _____