

ALZHEIMER'S GERM QUEST CHALLENGE

PRELIMINARY EXPRESSION OF INTEREST FORM

- Potential Competitor: Individual or Team Name:

- If "Team", list leader, principal members, job titles and affiliations:

- Organization Name: _____

- Affiliate or subunit of a larger organization? _____

- Department or Subunit (if applicable): _____

- Nature of Organization of Potential Competitor (e.g. academic, government, industry, nonprofit, corporation, other):

- Submitter's Contact Information:

- Name: _____

- Title: _____

- E-mail address: _____

- Telephone Number: _____

- Postal Address:

- Street: _____

City: _____ State: _____

Postal Code _____ Country: _____

- Institution, Organization, or Industry Affiliation of Submitter

- About the potential competitor: Up to 200 words in English. Concisely describe pertinent credentials, experience, resources, and/or capabilities. Up to five Web links may be provided to assist understanding and evaluation.:

By submitting this *Preliminary Expression of Interest* form you allow the Sponsor, ALZGERM.ORG & ALZHEIMER'S GERM QUEST, INC., to use the personal and other information that you have provided to contact you regarding this *Challenge Competition*. You further agree and understand that you are only expressing a non-

binding interest in participating in the *Challenge Competition* found on ALZgerm.org and that you are not yet accepted or registered as a Competitor for the Challenge. You may cancel or withdraw this interest at any time. If and when you are accepted, you will be informed of this, and receive further information.

The Sponsor reserves the right to not accept or consider further any Preliminary Expression of Interest deemed—in its sole judgement--not sufficiently qualified for any reason, or unsuitable or not harmonious with the intent of the Challenge.

Actual REGISTRATION requires accepted candidates to complete and submit the COMPETITOR REGISTRATION FORM which will be sent to each.

Signed by submitter:

____ (Please check). I/We have read, understand, and agree to the terms and conditions of this Preliminary Expression of Interest Application.

Name: _____ Date _____

Print name _____

SUBMIT COMPLETED FORM TO: entry@ALZgerm.org