

Neurobiology Conference Presentation

Conflict of Interest (COI) Disclosure Form

Presenter Name

Email Address

Affiliation

Presentation Title

Disclosure of Conflicts of Interest

- ☐ Financial Interests ☐ Advisory/Consulting Roles ☐ Patents/Royalties
☐ Other Relationships ☐ No conflicts to disclose

If any boxes are checked (except "No conflicts"), please provide details:

Signature

Date