



AMERICAN ACADEMY OF OTOLARYNGIC ALLERGY/FOUNDATION

Specialty Physicians Dedicated to the Quality Care of Patients with Allergic Disease

11130 SUNRISE VALLEY DRIVE, SUITE 100 Reston, VA 20191 202/955-5010 PHONE 202/955-5016 FAX WWW.AAOAF.ORG

AAOA Sponsored Resident Education Forum Nomination Form Four Seasons Resort and Club Dallas at Las Colinas | Dallas, Texas February 23–24, 2018

Please nominate one (1) resident candidate from your training program for a full sponsorship to attend the AAOA Resident Education Forum at the 2018 AAOA Interactive Allergy and Rhinology Course. Accepted residents receive:

- ✓ Free course registration for the Core Basic Allergy module
- ✓ Round-trip transportation to Dallas, TX
- ✓ Paid hotel accommodations for the night of February 23
- ✓ Breakfast and lunch at the course (dinner not included)

Residents are responsible for all incidental expenses (e.g. taxis, baggage fees) and cannot be reimbursed. Sponsorship opportunities are limited and will be filled based on a first-come, first-served basis, and all nominees will be notified by the AAOA.

Residents also have the option to attend a rhinology module on Sunday, February 25. This is an additional cost of \$250 to the training program, and includes registration and hotel accommodations for the evening of February 24.

Nomination Deadline: December 15, 2017

Please complete this nomination form and return it to the AAOA with a letter of recommendation from the resident's Training Program Chair or Director. Nominations may be e-mailed to aaof@aaof.org or faxed to 202-955-5016.

A resident must be a member of the AAOA or a candidate for membership to qualify. If the nominee is *not* a member, please complete the AAOA membership application and return it to the AAOA along with this completed nomination form and letter of recommendation from the Training Program Chair or Director.

We accept credit card payment for the \$45 member application fee. Please call the AAOA at 202-955-5010 to make your payment over the phone. You can mail your materials to the AAOA, but please know this will add approximately two weeks to the entire process. E-mail and fax are advised.

Each resident is responsible for any costs incurred due to a change or cancellation of their travel reservations. **The AAOA is not responsible for fees associated with transportation changes or cancellations due to inclement weather.** Residents must notify the AAOA of any changes to their itinerary or lodging arrangements 48-hours in advance.

Residency Program: _____

Name of Nominated Resident (*please print*): _____

E-Mail Address of Nominated Resident: _____

Cell Number: _____

Optional Rhinology Course (additional \$250/person): Yes: _____ No: _____

Name of Department Chair/Training Program Director (*please print*): _____

Signature of Department Chair/Program Director: _____

Date: _____

PLEASE RETURN THIS NOMINATION FORM, LETTER OF RECOMMENDATION, AND PAYMENT (IF APPLICABLE) TO:

E-mail: aaof@aaof.org
Fax: 202-955-5016 - Pay by CC by calling: 202-955-5010
AAOA 11130 Sunrise Valley Drive, Suite 100 Reston, VA 20191