



International Association of Oral and Maxillofacial Surgeons

Thank you for registering as a Trainee to attend the 24th International Conference on Oral and Maxillofacial Surgery (ICOMS) in Rio de Janeiro, Brazil. To complete your registration, we require verification of your enrollment in an oral and maxillofacial surgery training program. If you do not complete and return this form by March 1, 2019, you must pay the difference between the Trainee registration rate and the non-member registration rate prior to your arrival at ICOMS. If you would like to apply for IAOMS membership, please contact Katie Cairns at kcairns@iaoms.org or visit www.iaoms.org.

Trainee Verification To Be Completed By Trainee

Please note that we must receive this completed form to confirm your ICOMS registration.

Applicant Name:	Date:
Address:	
City:	State/Province:
Country:	Postal Code:
Email:	Mobile Phone:

Trainee Verification To Be Completed By Program Director

This is to confirm that the above named candidate for ICOMS Trainee registration is enrolled in the oral and maxillofacial training program at our institute.

OMS Training Program:	
Address:	
City:	State/Province:
Postal Code:	Country:
Anticipated Completion Date:	
Additional Comments:	
Program Director Name:	
Program Director Email:	
Program Director Signature:	Date:

Return This Form To:

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