# International Association of Oral and Maxillofacial Surgeons

Thank you for registering as an OMFS Trainee to attend the **27th International Conference on Oral and Maxillofacial Surgery (ICOMS) in Berlin**. 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 **August 1, 2027**, you must pay the difference between the Trainee registration rate and the regular registration rate prior to your arrival at ICOMS and in order to receive your name badge. If you would like to apply for IAOMS membership, please contact us or visit www.iaoms.org.

## OMFS Trainee Verification Form for IAOMS Membership

OMFS Trainee memberships are available exclusively for those pursuing oral and maxillofacial surgery training and Trainee Verification is required.

Applicant Name: Date:

Address:

City: State/Province:

Postal Code: Country:

Email: Mobile Phone:

## Trainee Verification To Be Completed By Program Director

This is to confirm that the above named candidate for IAOMS membership is enrolled in the oral and maxillofacial training program at our institution.

OMFS Program/Institution:

Address:

City: State/Province:

Postal Code: Country:

Trainee's OMFS Completion Date:

Additional Comments:

Program Director Name:

Program Director Email: Date:

Program Director Signature (required):

## Return This Form To:

Katie Cairns *(kcairns@iaoms.org) or upload to your IAOMS account.*