



Speaker Confirmation Agreement

By signature of this agreement, I, _____ confirm that I will be attending the 45th Academy Annual Meeting and Scientific Symposium, March 6-9, 2019 in Orlando, FL. I will be ready to present my submitted material on the date and time listed in my session confirmation email.

For the Academy Meeting App

Speaker Name

Company Name

Cancellation Policy

Your participation in the 45th Academy Annual Meeting and Scientific Symposium, March 6-9, 2019 in Orlando is important to the success of the event. Prospective attendees rely on the promotional material announcing customer participation. Upon your signature of this document, you agree that you will only cancel your participation due to circumstances beyond your control, and that you will notify us immediately. I have read this cancellation policy before affixing my signature below, and warrant that I fully understand the contents thereof.

Publication Release

By agreeing to be a speaker, you authorize the American Academy of Orthotists & Prosthetists to publish your name, company name, title, biography, and presentation abstract in the corresponding materials for the event. These materials may include all conference promotional pieces, website, and may possibly include any video and/or audio tapes recorded during the event. The speaker is responsible for obtaining any necessary approvals from his/her employer, if applicable. I have read the release, authorization, and agreement before affixing my signature below, and I warrant that I fully understand the contents thereof.

Name

Date

I understand that by typing my name on the line above I acknowledge and agree to the conditions set forth in this Speaker Confirmation Agreement.

Return this form by February 1, 2019 via email to mmaguire@oandp.org or via fax to 202-380-3447.