

SUBMISSION FORM

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Please type the following information:

I am submitting an abstract to be considered for presentation at the 2020 Therio Conference and if chosen will present it in the session designated by the Abstract Committee.

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ACT Abstract Submission

Author Agreement Form

This form must be signed by all authors. A copy of the completed form must be submitted along with the abstract.

Title of the Abstract:

The authors confirm the following statements:

1. That all authors have read and approved the abstract, are aware of the submission and agree to be listed as co-authors,
2. That the first author agrees to present the abstract at the annual conference. (Please refer to the Call for Abstracts for penalties concerning failure to present),
3. That this work has not previously been published or accepted for publication,
4. That, if accepted for presentation at the conference, the abstract will be published in Clinical Theriogenology as part of the conference proceedings.

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2020 Question Submission Form

Effective January 2016 – the ACT Board voted that invited conference symposia speakers would be required and DACT's providing abstracts be encouraged to provide an exam question. Please provide references if applicable.

DACT Name: _____

Question type multiple choice essay

Here is my question

Answer: