**International Atherosclerosis Society (IAS) Endorsement**

**Application Form**

**Organizing Society or Group:**

**Contact Details**

**Contact Person:**

**Surname First Name**

**Address**

**Postal Code City Country**

**Telephone Fax E-mail**

**Relevant Internet Address**

**Level of IAS participation:**

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Use of IAS name only

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Use of the IAS logo

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Suggestions for the development of the scientific program

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Link to the IAS website

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 Inclusion in the IAS e-Newsletter

**Detail of Event Requesting IAS Endorsement:**

1. **Name of the event:**
2. **Proposed date and place:**
3. **Scope of the event:**
4. **Specific objectives of the event** *Please attach the program as a separate file)***:**
5. **No of expected participants:**
6. **Sponsorship (please list all commercial and non-commercial sponsors):**
7. **CME Yes/No**

**If Yes, Name of Accrediting Organizing Organization**

**Application:**

We request the IAS Endorsement for this event and agree to the terms of the IAS guidelines. We have attached details of the scientific/educational program, venue and meeting organisation.

Date Signature

*Please, send your application IAS Executive Director, Michelle Winokur, DrPH, at* *Michelle.Winokur@athero.org**.*