3rd Trainee ACOMS 2017
Colombo | Sri Lanka

3RD ASIAN MAXILLOFACIAL TRAINEES CONFERENCE

Organized by

10th - 12th November, 2017 @ Hotel Taj Samudra, Colombo, Sri Lanka

REGISTRATION FORM

Participants are advised to read the registration information before completing the Registration Form. Please complete and return the form (with appropriate payment) to:

Secretary,
Sri Lanka Association of Oral & Maxillofacial Surgeons,
C/O Sri Lanka Dental Association,
275/75, Buddhaloka Mawatha,
Colombo 7, Sri Lanka.

+94 77 7774764
+94 11 2595147
slaoms2017@gmail.com
suresh1965@hotmail.com

A separate registration form must be used for each participant other than accompanying person.

PARTICIPANT

Title (please ☑)	☐ Professor	☐ Dr	☐ Mr	☐ Mrs	☐ Ms
Last Name:			First Name:		
Institution:			Department:		
Address:					
Postal Code:			Country/Region:		
Telephone:			Fax:		
E-mail:					

ACCOMPANYING PERSON (S)

Title (please ☑)	☐ Professor	☐ Dr	☐ Mr	☐ Mrs	☐ Ms
Last Name:			First Name:		
Title (please)	☐ Professor	☐ Dr	☐ Mr	☐ Mrs	Ms
Last Name:			First Name		

REGISTRATION (please ☑ where appropriate)	On or Before 10th October, 2017	On-site Registration
Local Trainees	☐ LKR 15,000/-	☐ LKR 25,000/-
SLAOMS Members	☐ LKR 20,000/-	☐ LKR 30,000/-
Foreign Trainees	☐ USD 175/-	☐ USD 250/-
Surgeons	☐ USD 200/-	☐ USD 300/-
Trade & Industry Representative	☐ US$ 150/-	☐ US$ 200/-
Accompanying Person	☐ US$ 150/-	☐ US$ 200/-

Sub-total (A) :

STUDENT CERTIFICATION

I Certify that _____ is a full time dental student.
Name of Institution : _____ Head of Department _____

Authorized Signature : _____ Official Stamp : _____ Date : _____

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SOCIAL PROGRAM		
Opening Ceremony - 10th Nov. 2017	( ) Ticket (s) X Complimentary*	——
Welcome Reception - 10th Nov. 2017	( ) Ticket (s) X Complimentary*	——
Sri Lankan Night - 11th Nov. 2017	( ) Ticket (s) X US$ 60	

* Complimentary to all registered congress participants.
** Final arrangements are subject to weather conditions and/or whether the minimum quota can be met. Advance notice of changes will be given.

Sub-total (B) :

Grand Total (A+B) :

PAYMENT DECLARATION

(please ☑ where appropriate)

❖ **Bank Transfer**
For the total amount of US$ payable to
"Sri Lanka Association of Oral & Maxillofacial Surgeons (SLAOMS)." (Name of Bank: SAMPATH BANK PLC, Dharmapala Mawatha, Colombo 7, Bank Account number: 0175 6000 0634, Swift Code : BSAMLKLX 7278, Currency: USD (US Dollar)

❖ **Bank Draft**
I am enclosing a bank draft no _____ for the total amount of US$ _____ payable to **"Sri Lanka Association of Oral & Maxillofacial Surgeons (SLAOMS)".**

* Please note all US dollar transactions by credit will be charged at the rate US$ 1.

Do you require a formal Letter of Invitation ? Yes ☐ No ☐

Pre-Registration
Participant will not be processed or confirmed until payment in full is received. All payments are to be made in US Dollars by cheque, bank draft or credit card.

On-site Registration
It will be possible register upon arrival at the Congress venue in Sri Lanka for the Scientific Program and purchase tickets for the social programs, tours and excursions, subject to availability. Payment can be made by cash or credit card.

Acknowledgements
Your registration and payment will be acknowledged in writing with confirmation of your requirements according to your registration form. This acknowledgement also serves the purpose as Official Receipt. Please present it at the registration counters to obtain your participant package. Details of registration counters' operation hours and amival guide will be announced before the Congress commencement.

Changes and Cancellations
Any change or cancellation must be received in full and in writing. No change requested by telephone will be accepted. All bank service charges will be deducted from the refunded amounts. All refunds will be made in 30 days after the Congress from administrative reasons. Participants are advised to keep a copy of the registration form. Refunds for cancellations of registration will onli be made subject the following deadline and charges:

	On or before 10th October, 2017	After 10th October, 2017
Registration / Workshop fee	50%	Forfeited

3rd Asian Oral & Maxillofacial Trainees Conference
Colombo - Sri Lanka
10th - 12th November, 2017

CALL FOR ABSTRACTS

Abstracts are invited 3rd Asian Oral & Maxillofacial Trainees Conference themed on 'En Route to Clinical Eminence in CMF surgery' to be held in Colombo, Sri Lanka will consist of plenary sessions, oral and poster presentations, and workshops.

Registration to the 3rd Asian Oral & Maxillofacial Trainees Conference is necessary if you intend to submit an abstract for consideration by the Scientific Committee. Submission of abstracts for oral and poster presentation to be done only by online.

KEY DATES

Abstract Submission	Closes on 15th September, 2017
Registration	Now open
Authors Notified of Abstract Acceptance	5th October, 2017

PRESENTATION FORMAT

Oral presentation

Oral presentation will be notified of their length of presentation time in the acceptance letters. Abstracts selected for Oral Presentation may be eligible for Poster presentation.

If an author wishes to submit more than one abstract, he/she can be the primary author of only one oral presentation. If more than one abstract is accepted by one and the same primary author, such submission may be eligible for poster presentation. If said primary author has co-authors, the secondary author may present the accepted submitted abstract. Provided the secondary author is also a registered delegate to the congress.

E-Poster presentation

E-poster presentations are visual display of research projects and special cases. The poster display is an integral part of the congress and will be available for viewing within the designated area accessible to all delegates. Full details of the format of the interactive poster will be given to the primary author/presenter after acceptance of the abstract.

THEMES

3rd Asian Oral & Maxillofacial Trainees Conference is open for submission of abstracts with any of the following themes:

Dentoalveolar surgery
Dental Implantology & Grafting
Oral & Maxillofacial Pathology
Craniomaxillofacial Trauma
Head & Neck Oncology
Reconstructive Surgery
Cleft & Craniofacial Anomalies
Orthognathic & Aesthetic Surgery
TMJ Disorders & Surgery
Research / New Technologies

CALL FOR ABSTRACT SUBMISSION

Important Reminders for Submission*:*

1) **Abstracts may only be submitted online.**

   The deadline for submission will be strictly followed. Past this deadline, no abstracts will be accepted.

2) **Presenters will be notified of the status of their abstracts. Submission of an abstract constitutes a commitment by the author/s to present if selected.**

3) **All presenters are required to pre-register for the meeting (see Registration Guidelines) and pay all applicable fees PRIOR to inclusion in the Final Program. This can be accomplished prior to submission of abstract.**

4) **All authors/presenters are required to register their personal information details. Authors/Presenters are advised to make sure that the same email address and password are used, both for submitting their abstracts and for completing / paying for their registration.**

5) **The delegate whose sends the abstract will be considered as the primary author / presenter.**

Instructions for Abstract Submission:

1) Abstracts must be in English.

2) Abstracts will be reproduced exactly as submitted. Edit your abstract to avoid errors and misspellings. Your abstract may be rejected if not comprehensible.

3) Ensure that the abstract form is completely filled out before submission.

4) Title: CAPITALIZE the entire title. It should be informative, concise and no longer than 135 characters.

5) Author/s: Give the full name of every author, including degrees; omit titles and institutional appointments.

6) Institution/s: Indicate the name and address of the institution/s where the research work was created.

7) Text (must not exceed 250 words): Abstracts should be adequate and pertinent information describing the contents of the scientific paper. The text should not exceed 250 words and should be arranged in the following format:
    - Objective
    - Methods
    - Results
    - Conclusion
8) Abbreviations, acronyms and symbols should be defined the first time they are used. Place the abbreviation in parentheses after the full word.

9) Use generic names of drugs.

10) Proprietary and/or financial interests in any product (or competing products) described in the abstract must be disclosed.

NOTIFICATION OF AUTHORS

Notification of authors will be communicated by 5th October, 2017. All correspondence relating to the submission will be directed to the primary author. This person, should in turn, distribute the correspondence to all co-presenters.

FURTHER ENQUIRIES

For enquiries regarding abstract submission please contact the 3rd Asian Oral & Maxillofacial Trainees Conference Scientific Committee on

slaoms2017@gmail.com / suresh1965@hotmail.com