

MOCK ORAL BOARD EXAMINATION SECONDARY REGISTRATION FORM

To register for the Mock Oral Examinations and to be eligible for the Gore sponsored scholarship, you must complete the following:

- 1- **Register for the Annual Meeting.** Meeting registration (under separate subscription) is required unless excused by a letter from your Program Director.
- 2- Complete this form and return via fax to 978-524-0461. All fields below are REQUIRED to finalize your registration.

ATTENDEE INFORMATION *(please print)*

Name _____ Hospital/Affiliation _____

Address _____ City _____

State/Province _____ Country _____

Phone _____ Fax _____ Postal Code _____

Email Address *(required for confirmation)* _____

VASCULAR SURGERY PROGRAM INFORMATION

Program _____ Year in Residency _____

Program Director _____ Program Director's Email _____

Department Chair _____ Department Chair's Email _____

State/Province _____ Country _____

Phone _____ Fax _____ Postal Code _____

General Surgery Program _____

SCHOLARSHIP REIMBURSEMENT

Check should be made payable to: Program Yourself