

FLYING PHYSICIANS ASSOCIATION 2022 ANNUAL MEETING

Speaker / Faculty Information Form (Revised 2021)

Please return no later than September 15, 2021

Please include as much information as possible. Return the completed form as an attachment to an email addressed to: ahenderson@fpadrs.org

The form may also be mailed to: FPA Headquarters, 11626 Twain Drive, Montgomery, Texas 77356.

Last Name:		First Name or/Initial:		Middle Name or Initial:	
Professional Degrees:		Medical Specialty:		Nickname or badge name:	
Military Rank (if applicable):		Institution or Employer:		Department:	
Your preferred mailing address (to receive print mail connected to this meeting):					
City/State/Zip:					
ACADEMIC TITLE/S (for publication)					
Hospital / Clinic / Company / Organization					
City/State:					
Your Daytime Phone:		Cell Phone:		FAX Number:	
Contact Person in your office:		Contact's email:		Contact's phone:	
EMERGENCY CONTACT NAME:		Emergency contact's phone:		Emergency contact's email:	
YOUR PRESENTATION TITLE					
Day/Date preferred:		Presentation Time preference/s (8 am, 9 am etc)			
		:			
Arriving by: ___ Private aircraft** ___ Commercial Flight ___ Private Car				**Tail # make/model	
Expected Arrival/Depart:		Arrive : Depart:			

Are you an FPA Member: ___ YES ___ NO Interest in Joining? ___ YES ___ NO

Emergencies occur, and this request is based on experience. Used only by FPA staff and is not shared.