



### Application for Charter Chapter Meeting

Country:

Key Contact Name:

AO status (check one):  Affiliate  Active  Fellow

Number of years as an AO member:

(Please submit your full curriculum vitae with this application)

Number of AO members in your country:

Please state what type of meeting you would like to run: (Check any one or more boxes below)

- |                         |                          |  |
|-------------------------|--------------------------|--|
| A. Full Day Symposium   | <input type="checkbox"/> | (This would be with more than one speaker)   |
| B. Full Day Masterclass | <input type="checkbox"/> | (This would be with one speaker only)  |
| C. Full Day Study Club  | <input type="checkbox"/> | (This would be without speakers. i.e. discussion group)                                      |
| D. Half Day Symposium   | <input type="checkbox"/> | } <input type="text" value="Any 2 half day sessions can be combined to create a full day."/> |
| E. Half Day Masterclass | <input type="checkbox"/> |  |
| F. Half Day Study Club  | <input type="checkbox"/> |  |
| G. Half Day Hands-on    | <input type="checkbox"/> |  |

What do you propose for the content of the meeting?

How many speakers do you intend to invite?

Will the speakers be national?

Will the speakers be international?

How many AO member delegates do you expect?

How many non-member delegates do you expect?

Please provide your proposed budget in US\$ including:

- i. Cost of venue US\$ \_\_\_\_\_
- ii. Cost of audio-visual hire US\$ \_\_\_\_\_
- iii. Cost of food/delegate US\$ \_\_\_\_\_
- iv. Cost of lecturers (honorarium, flights, hotel etc.) US\$ \_\_\_\_\_

Please give an account of why you believe the AO should support your application for Charter Chapter status: