

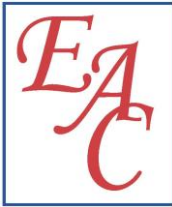


2021 Eastern Allergy Conference

DATE: _____

450 Veterans Memorial Pkwy
East Providence, RI 02914
Phone 401-223-1309 Fax 401-331-0223
ginnyloiselle@easternallergyconference.org

NAME: _____
Business Name: _____
Street Address: _____
City, ST ZIP: _____
Country: _____

PLEASE PROVIDE THE FOLLOWING INFORMATION:	
	 www.EasternAllergyConference.org
Author:	
Author email	
COST to non-commercial abstracts	<input type="checkbox"/> Submission only <input type="checkbox"/> Submission and publication
COST to Commercially funded abstracts	<input type="checkbox"/> \$350.00 (submission only) <input type="checkbox"/> \$800.00 (submission and publication)

- All abstracts must be submitted with this abstract submission form to EAC via email (ginnyloiselle@easternallergyconference.org) or fax (401-331-0223), attention Ginny Loiselle
- Abstract corresponding authors will receive E-mail notification of the abstract receipt and status.
- Abstracts will be posted on the EAC website at the conclusion of each meeting.

The abstract review committee (program committee) will review all abstracts via the Internet.

Please charge my credit card \$0.00 non-commercial submission only \$0.00 non-commercial submission plus publication
 \$350.00 submission only \$800.00 submission plus publication

Name on card (please print): _____

Credit Card Number : _____ Exp. Date: _____

Signature: _____