



American Academy of Periodontology  
737 North Michigan Avenue, Suite 800  
Chicago, Illinois 60611-6660  
(800) 282-4867 – [member.services@perio.org](mailto:member.services@perio.org)

**2023 ANNUAL MEETING WAIVER REQUEST FORM**  
**Austin, Texas**  
**November 9 – 12, 2023**

**Bylaws Requirement:** Active Members are required to attend at least one Annual Meeting during each three-year period. Associate Members are required to attend at least one Annual Meeting during each five-year period. These attendance requirements must be met unless the Board of Trustees has approved a petition for extension of the time period.

In the event of illness or other extenuating circumstances a member may petition the Board of Trustees for an extension of the designated period. Waivers for physical disability or severe financial problems must be supported by documentation. Such a petition must be submitted no later than 60 days after the Annual Meeting at which attendance would have been required in order to comply with the attendance requirements.

**Name:** \_\_\_\_\_

**Member ID:** \_\_\_\_\_

**Address:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Reason (Please print clearly or type):**

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**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Return to:** American Academy of Periodontology  
Membership Department  
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Fax: (312) 573-3225  
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