



AAE Affiliate Resource Manual

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INTRODUCTION

AAE Affiliates provide a valuable opportunity for AAE members to gather locally and grow professionally on a more regional basis. Members such as you who step up as volunteers to serve as affiliate leaders provide an invaluable service to your affiliate members. Over the course of your leadership role, you may have questions or concerns regarding your anticipated responsibilities. The AAE has put together this "AAE Affiliate Resource Manual" to help address and answer any questions that may arise for our affiliate leaders.

As you browse through this manual, you will find information that will facilitate putting together an effective continuing education program for your members, information on financial guidelines/issues for AAE affiliates, and information on various AAE services that are available and designed to support your affiliate organization.

We hope this information will be useful for both you and future leaders of your affiliate. Should you have any questions or are looking for further information, Heather Bridges, AAE Manager of Member Engagement, has been assigned as your point of contact within the AAE national organization. Heather can be contacted by phone at 312-872-0446, or by email at hbridges@aae.org.

MEETING PLANNING

This is an introduction to the details that are required for an AAE affiliate to plan a scientific meeting and the comments that are being presented are to provide a platform for the affiliate's brainstorming forum.

The reward for hosting an American Dental Association Continuing Education Recognition Program (ADA CERP) recognized meeting creates the most significant affiliate member value. Whether the goal is a program of a half day/full day meeting or even a seasonal theme multi-day conference, the members attending an affiliate continuing education seminar will be experiencing benefits beyond the lecture presentation and CE credits:

- Interaction socially and professionally with colleagues that will lead to quality networking.
- Opportunity to invite other District Affiliate leadership and members to your affiliate continuing education program.
- Openings for leadership opportunities on AAE, ADA, state associations and local component committee appointments.
- AAE bridging the gap: relevant information connecting the AAE leadership and district directors with input to the affiliate's needs and concerns.
- A stronger building bond between the affiliate members and the local graduate program director, the residents, and could provide private practice endodontists with information on part or full time faculty positions available with the graduate program.

The planning of an Affiliate ADA CEPR recognized meeting becomes the epicenter for creative teaching and for successful outcomes that will empower the affiliate's vision and mission.

BECOMING AN ADA CERP PROVIDER

The American Dental Association's Continuing Education Recognition Program (ADA CERP) evaluates and approves organizations and individuals that provide continuing dental education. It does not approve the specific courses and educational activities offered by those organizations, nor does it approve the credit hours that continuing education providers offer.

AAE affiliates, districts, schools, companies and other groups may wish to apply for national ADA CERP recognition. In order to be an approved provider, applicants must meet the eligibility requirements identified on page one of the [ADA CERP Recognition Standards and Procedures](#). Applicants must also meet all of the standards and criteria for recognition.

For more information about applying for ADA CERP recognition, contact Kim Hendricks at hendricksk@ada.org or 800-621-8099 ext. 2869.

In addition to applying for sole recognition status through ADA CERP, AAE affiliates, districts, schools, companies and other groups can work with an ADA CERP recognized provider to jointly sponsor a CE program. In Joint Sponsorship, the CERP recognized provider assumes responsibility for the planning, organizing, administering, publicizing, presenting, and keeping records for the planned continuing dental education activity. See ADA CERP Recognition Standards and Procedures, Standard IX. Administration, Criteria 13-14, and Joint Sponsorship Policy for more information.

For more information on Joint Sponsorship, contact a local ADA CERP recognized provider. [Access a list of ADA CERP recognized providers.](#)

ADA CERP EXTENDED APPROVAL

AAE districts have the option of applying for extended approval through the AAE; only ADA constituent (state) societies and ADA-recognized specialty organizations that have been granted ADA CERP recognition are eligible to review and extend ADA CERP recognition to their components societies (local societies).

The extension of ADA CERP recognition by the AAE is limited to its districts that offer continuing education primarily to their own members. It does not include districts that sponsor CE programs targeting dentists from other states, particularly components with large, regional dental meetings.

Through the extended approval process, the AAE accepts responsibility to ensure that the CE activities offered by the district will be conducted following established ADA CERP standards and criteria.

For more information about the AAE's ADA CERP extended approval process contact the AAE Meetings Department at meetings@aae.org or 800-872-3636.

AAE RECOMMENDED SPEAKERS LIST

The AAE Recommended Speakers List is a valuable resource for affiliates in programming continuing education meetings. This list includes clinical topics and corresponding recommended speaker(s) who have been approved by the AAE Board of Directors as topic experts. Session titles/descriptions, a biography, disclosure statements and contact information are available for each speaker listed. Affiliates may contact these individuals directly to discuss their potential participation in its CE meeting.

View the Recommended Speakers List [online](#) or contact the AAE Meetings Department at meetings@aae.org for more information.

SAMPLE TIMELINE FOR CE EVENT PLANNING

TASK	Who	Due Date (mos. before mtg.)	Notes
1. Finalize budget		15 mos. prior	
2. Send out RFP to prospective hotel locations		15 mos. prior	See Appendix A
3. Select hotel and negotiate contract		15 mos. prior	
4. Finalize program topic		13 mos. prior	
5. Identify speakers and subtopics		13 mos. prior	
6. Confirm speaker interest/availability		12 mos. prior	
7. Contact potential exhibitors, if applicable		9 mos. prior	
8. Create website text and logo, if applicable		8 mos. prior	For ADA CERP, program would need to follow all ADA CERP standards.
9. Send first speaker letter/forms		8 mos. prior	See Appendix B
10. Speaker materials/forms due		7 mos. prior	
11. Mail program to prospective attendees		6 mos. prior	For ADA CERP, program would need to follow all ADA CERP publicity standards.
12. Open registration		6 mos. prior	For ADA CERP, program must be available to potential registrants before registration opens.
13. Draft evaluation form		4 mos. prior	See Appendix C For ADA CERP, ensure all evaluation criteria are met.
14. Send second speaker letter		4 mos. prior	See Appendix D
15. Cut-off for early registration		1.5 mos. prior	
16. Handouts due from speakers		1 mos. prior	
17. Draft onsite material		1 mos. prior	
18. Draft moderator instructions/talking points		2 wks. prior	

19. Print additional onsite agenda and any other materials, i.e. handouts		2 wks. prior	
20. Print and assemble badges/registration packets		2 wks. prior	Based on shipping date, if applicable
21. Registration closes		1 wk. prior	
22. Ship final programs, first aid kit, and all other materials to meeting site, if applicable		1 wk. prior	
23. Send last minute reminders to speakers		1 wk. prior	
24. Prepare verification of participation letter for distribution at the event , if applicable		1 wk. prior	For ADA CERP, ensure all verification letter standards are met.
25. Process CEC chair and speaker reimbursement requests		1 wk. after	
26. Prepare evaluation report based on completed evaluation forms		4 wks. after	For ADA CERP extended approval, submit to AAE.
27. Send verification of participation letter to attendees, if applicable		4-8 wks. after	See Appendix E
28. Prepare and distribute speaker thank yous and evaluation reports to speakers		6 wks. after	

MEETING PLANNING TIPS

- Ask for concessions in your Request for Proposal (RFP) to the hotel. It doesn't hurt to ask for things like upgraded suites, 1 complimentary room for every 30 (40 is typical) paid room nights, free Wi-Fi, parking, etc. The hotel may or may not give concessions depending on how much you will be spending for rooms and food and beverage, etc.
- It helps to give the hotel (or facility) as much detail as possible as to what meal functions will be held at the hotel. The more money they know they'll make, the more concessions they'll give. If there is a sleeping room block, meeting rooms are almost always complimentary.
- Almost everything is negotiable. Don't hesitate to go back and request a lower food and beverage minimum, deposit, etc.
- Don't forget to review banquet menus before committing to a venue. Make sure their prices fit into the overall budget and don't forget to include the tax and gratuity which are not negotiable. These usually add anywhere from an additional 25-35 percent.
- Every hotel/venue has its own in-house AV. These prices are almost always negotiable also. They will charge for everything including power strips and labor to "install" them. Ask about bringing in your own. Sometimes it is allowed.
- If serving liquor at a reception it is usually less expensive to pay by the drink and not do a package.

AAE PRESIDENT OR DIRECTOR VISITS TO AFFILIATE MEETINGS

Guidelines for AAE Officer and Director Visits

The American Association of Endodontists welcomes invitations from its affiliates and recognized study clubs for an AAE officer (usually the president-elect) and/or director from that affiliate's district to update their members on the ongoing activities of the AAE and to provide the opportunity, one-on-one, to discuss issues relevant to the specialty and other regional concerns. In an effort to make such speaking engagements beneficial for both the AAE and the inviting organization, the AAE Board of Directors established the following guidelines:

Invitation

An invitation must be submitted in writing to the Executive Director at the Headquarters. In consideration of the officers' many obligations and busy schedules, the invitation should be received at least 120 days in advance of the scheduled event. The invitation should include the following information:

- Purpose of meeting
- Date and time of presentation
- Number of days required
- Location
- Anticipated number of attendees
- Other information that may be appropriate

Acceptance

The officer and/or director will accept the invitation as long as no schedule conflicts exist and the officer has at least one hour to speak and answer questions. This will ensure that the time, effort and expense required are worthwhile for both the speaker and inviting organization.

Financial obligations

- The inviting organization is responsible for the officer's and/or director's hotel accommodations.
- The AAE will provide per diem and round-trip coach airfare. The AAE Headquarters coordinates all financial considerations with the affiliate.
- The AAE will not cover expenses for a director attending his or her own affiliate's meeting.

Reports

The invited officer and/or director completes an expense reimbursement form and Affiliate Visit Form.

Gift

A small gift may be presented to the affiliate president or representative.

Communication

The AAE is happy to provide affiliates with print materials for use as handouts at events (product catalogs, newsletters, free clinical resources, etc.), as well as information about current AAE activities in the form of a *State of the AAE* PowerPoint presentation. Requests can be directed to the Communications staff at communications@aae.org.

A brief summary of the event, including any photographs that may have been taken, may be submitted to AAE Communications staff at communications@aae.org for publication in AAE newsletters and/or online.

FINANCIAL RESOURCES

Maintaining the financial health of your State Affiliate is of paramount importance since you, the Executive are responsible for being the custodian of your member's contributions to your Association. All monies should be accurately accounted for and measures should be taken to prudently manage the Affiliate's finances. Whether you maintain a simple checking account or have a more complex investment and disbursement system, the following section will provide you with some helpful information that you need to better manage your affairs.

FINANCIAL GUIDELINES FOR AFFILIATES

- Have an official business checking account for your affiliate organization, separate from personal banking accounts of its officers, in order to have clear records of income and expenses.
- Attach receipts for all expenses to each bank statement and reconcile your statement every month
- Keep bank statements for seven years in a secure location.
- If your affiliate employs staff, payroll taxes and social security need to be paid according to federal and state laws.
- Every year, consult with a tax advisor if your affiliate needs to file a 990 form *Return of Organization Exempt from Income Tax* with the IRS. 990 forms are used for taxpayers and tax-exempt organizations to report financial information to the IRS.
- If within a calendar year, your affiliate pays \$600 or more to any individual other than an employee, you will need to send that person a 1099 tax form *Miscellaneous Income*. A 1099 tax form is used to report income to an individual that is not part of the wages, salaries and tips reported on a W-2. Consult with a tax advisor before December 31 of each year.
- Consult with either an accountant or a lawyer to ensure that your affiliate has the correct tax exemption.
- [Directors and Officers insurance](#) can be obtained inexpensively with the AAE.
- A basic bookkeeping template is provided in [Appendix F](#).

OVERVIEW: AFFILIATE TAX EXEMPTION

Why should my affiliate apply for tax exempt status with the IRS?

Professional associations such as AAE affiliates that meet the requirements of Internal Revenue Code section 501(c)(6) are exempt from federal income tax. An AAE affiliate which has not received IRS recognition of exemption may be required by the IRS to file tax returns as a taxable corporation, irrespective of its level of income.

What are the requirements for exemption?

IRS Publication 557, *Tax Exempt Status for Your Organization* discusses the rules and procedures for organizations that seek recognition of exemption. This booklet is accessible on the IRS Web site at <http://www.irs.gov/pub/irs-pdf/p557.pdf>.

Affiliates wishing to independently apply for recognition must complete IRS Application Form 1024, *Application for Recognition of Exemption*: <http://www.irs.gov/pub/irs-pdf/k1024.pdf>.

Exempt affiliates with \$50,000 or more in gross income in any calendar year (e.g., from dues collection or meeting registration fees) are still required to file an IRS tax return annually (Form 990 or 990EZ).

Exempt affiliates with less than \$50,000 of gross income need to file an "e-postcard" annually (Form 990-N) to inform the IRS that the organization is still operating. Information provided on this e-postcard includes the organization's Employer Identification Number or Taxpayer Identification Number, name and address, name and address of a principal officer, a Web site address (if applicable), and confirmation that the organization's gross income does not exceed \$50,000.

How do I know if my affiliate is already tax exempt?

If your affiliate has received tax exemption, you should have an IRS determination letter stating recognition of exempt status. You may also confirm your organization's status by calling the IRS (toll-free) at 877-829-5500.

Where can I find more information?

The IRS makes non-profit tax information, explanations, guides, forms and publications available through its website at <http://www.irs.gov/charities/nonprofits/index.html>.

In addition, your Secretary of State's office provides information about state requirements for forming a non-profit organization, filing annual reports with the state and various state tax exemptions that may apply to your affiliate. The Secretary of State should also be able to provide a Certificate of Good Standing to existing non-profits that satisfy all the relevant requirements of the state's statutes.

AAE SERVICES

In the following pages you will be directed through the different benefits the AAE can offer to your Affiliate. The insurance plan from CNA insurance offers protection for the Affiliate officers, directors, and volunteers as they perform their duties of leadership. To help you with dues collection and administrative records the AAE offers a program that bills your membership, collects fees, and provides your treasurer with all the necessary documentation, all at a very nominal fee.

As you start to plan your affiliate meetings the AAE has thought through every detail and included all the templates to make your meeting successful. This section includes information on how the AAE can assist you in reaching out to your membership about upcoming events through mass emails and District Newsletters, and even includes information on how to obtain an AAE logo for your Affiliate's use.

With everything right here at your fingertips, your next Affiliate event is sure to be a success.

DIRECTORS AND OFFICERS INSURANCE

- Directors & Officers Insurance is offered by the AAE through CNA Insurance Company.
- The policy can protect affiliate officers, directors and volunteers for all decisions that are made at the affiliate board level.
- A partial list of what is covered includes:
 - Libel
 - Slander
 - Infringement of copyright
 - Unauthorized use of title
 - Wrongful dismissal or discharge of employment
- The insurance covers Damages and Defense costs within the limits of the policy.
- Claims are only covered during the policy period, so a policy should never lapse or the affiliate chances the possibility of an uncovered lawsuit.

There is a nominal fee to each Affiliate that requests coverage. Additional information on the program and an application can be obtained from AAE Headquarters.

DUES COLLECTION

The AAE offers a voluntary dues collection program for affiliate organizations. The purpose of the program is to ease the administrative burden of soliciting and maintaining membership records by affiliate groups, and to encourage local activity among affiliate members through the consistent collection of membership fees. Participating affiliates are encouraged to use these collected dues for the development of unique programs and services for their members (e.g., events to facilitate continuing education or networking). These benefits should be communicated to AAE membership staff for use in promoting affiliate membership.

Administrative Fee

An administrative fee will be charged to participating affiliates to cover the administrative costs of the program. This fee is equivalent to \$2 per individual invoiced by the AAE. If you wish to offer specific member rates for each individual member type, the fee is \$3 per individual. (See chart below)

Member Type	Membership Fee
Active	100% of chosen rate
Active 1 st year	50% of Active rate
Active 2 nd year	75% of Active rate
Educator	50% of Active rate

Program Details

The AAE is responsible for:

- Adding a line item to its membership dues invoice listing affiliate dues for **all** AAE Active, Educator and Life members (Retired and Resident members may be added at affiliate's request) in the participating state or Commissioned Corps of the United States Public Health Services. *(NOTE: Members who participate in your affiliate from another state must be identified in advance of dues billing.)*
- Announcing to membership that the online dues payment system has been activated, and their affiliate and AAE dues can be paid online 24 hours a day, 7 days a week.
- Mailing invoices (according to the AAE dues collection schedule). First invoices will be sent in May, and two additional reminder invoices will be sent in June and August to those members who have yet to pay their dues.
- Announcing the Affiliate Dues Collection Program in AAE communications vehicles.
- Mailing dues collection payments to affiliate president or treasurer in September and January. A third check will be mailed if the AAE receives any additional affiliate dues payments between January 1 and April 30.
- Providing the affiliate president and treasurer with a list of affiliate members who have paid dues, and a list of members who chose not to pay affiliate dues.

The Affiliate is responsible for:

- Specifying the amount of dues to be collected by the AAE and modifying the affiliate dues cycle to coincide with the AAE's fiscal year billing cycle (July 1 – June 30).
- Identifying AAE members who participate in the affiliate from other states in advance of billing.
- Completing and signing the enclosed agreement form and returning it the AAE **by March**.

How to Participate

Each affiliate President receives a contract annually which includes information specific to that state, including how many members would be invoiced and what the administrative cost would be for each option.

For additional information, please contact AAE Membership Director Kelly McNamara at kmcnamara@aae.org or at 800-872-3636.

CONSTITUTION AND BYLAWS

The AAE provides templates for its Affiliates to use in developing or updating their own Constitution and Bylaws. These templates cover basic organizational structure for most Affiliates and may be added to or adjusted based on the individual organization's needs. Samples are available in [Appendix G](#).

MASS EMAILS

- The AAE helps affiliates communicate to their constituents by sending mass emails at your request at no cost to you.
- Just send the announcement you would like to distribute to your affiliate members to AAE's Membership Department (membership@aae.org) with instructions about timing and the recipients. A mass email

request form is included as [Appendix H](#). Request forms must be received **at least two weeks in advance** of your send date.

- You will have the opportunity to see the email before it is sent.
- You may choose if you want the email to be sent to members in your state, members in your district, or the entire membership. Both District Directors must approve any emails sent to the district. Affiliates may send an email to the entire membership **once per year**.

DISTRICT AND AFFILIATE LOGOS

When a logo of the American Association of Endodontists is used, a promise of excellence, integrity and professionalism is reflected. This powerful member benefit gives AAE districts and affiliate organizations visibility and recognition, and reflects that they are a part of a professional community with high standards. Precision and consistency when using AAE logos are critical to success. The enclosed guidelines will help AAE districts and affiliate organizations use the logos in a manner that upholds the integrity and distinction of the AAE brand.

The logos of the AAE are the exclusive property of the AAE. Any use or reproduction by anyone who is not an Active member in good standing of the Association, or by any such member in a manner that does not conform to that described in this document, is prohibited. Unauthorized use of the logo may result in legal action.

If you have any questions regarding the use of the logo, contact the AAE Communications Department at 180 N Stetson Ave Ste 1500, Chicago, IL 60601; 800-872-3636 (U.S., Canada, Mexico); 312-266-7255; or communications@aae.org.

Sample Logos

Upon request to the AAE Headquarters office, logos are created for AAE districts and affiliate organizations to resemble the samples below:

District Logo



Affiliate Logo



Who can use the AAE logos?

The district and affiliate logos are for use exclusively by **AAE District Directors or officers of recognized affiliate organizations**.

Where can the logos be used?

- On official AAE district or affiliate organization stationery (envelopes, letterhead, fax and memo cover pages,

etc.);

- On AAE district or affiliate websites;
- In printed or electronic directory listings; and
- In promotional materials for AAE district or affiliate events if appropriate permission has been granted (refer to *Permission* below).

What are the rules for using the logos?

Permission

- AAE district and affiliate logos may only be used by AAE District Directors or officers of recognized Affiliate organizations, or others who have been appointed by them to carry out official district/affiliate business.
- AAE district logos may only be used in promotional materials of an affiliate organization with the agreement of all AAE Directors in the affiliate's district.

Physical Modifications

- The AAE logo must be used in its entirety.
- The AAE logo may not be altered in any way, including proportion, color, element, type.
- Never tilt, skew, expand, condense or place the AAE logo inside a shape.

Misrepresentation

The AAE *restricts* the use of its logos in the following instances:

By anyone in any circumstance(s) that would imply or suggest to the public that an AAE district or affiliate is being officially represented when that is not the case.

Assimilation of Logo

The AAE logo may not be used in connection with, assimilated by or merged in any way with another design or trademark. This does not mean that a district's or affiliate's stationery or website cannot have any other design or trademark on it, but that the AAE logo must be separate from any other picture or design so as to maintain its distinct and separate identity. Furthermore, the logo may not be used on stationery or websites that contain otherwise unethical or illegal representations of the character of the practice. (Refer to *Misrepresentation*.)

When representing a partnership, the AAE logo and partner logo should be of equal size. In a vertical format, the AAE logo should appear above. In a horizontal format, the AAE logo should appear to the left.

Presentations

The logo may not be used on district or affiliate presentation title slides or other presentation slides obtained from sources outside the AAE.

Educational Materials

The logo may not be used on patient education materials or publications developed by districts or affiliates.

What colors and file types can be used?

The official color of the district and affiliate logos is a shade of blue ink known to printers as PMS 287, or C:100 M:69 Y:0 K:11. The logo in color reproduction should always be in this color, black or white.

The following chart will help determine what logo file types are needed for various media.

	WEB	POWERPOINT	E-MAIL	PRINT
EPS				✓
TIF				✓
JPG	✓	✓	✓	

Where can I get the logos? What if I have questions?

The AAE Communications Department staff is available to provide you with the logo file that is perfect for your needs, and can also answer questions regarding logo usage and technical specifications. Contact us at 180 N Stetson Ave Ste 1500, Chicago, IL 60601; 800-872-3636 (U.S., Canada, Mexico); 312-266-7255; or communications@aae.org.

SAMPLE REQUEST FOR PROPOSAL

The American Association of Endodontists was founded in 1943, and approximately 93 percent of the nation's endodontists are members of the AAE. The AAE currently has over 7,500 members from the United States, Canada, and around the world. Endodontists are the dental specialists who perform root canal treatment.

The American Association of Endodontists promotes the exchange of ideas on the scope of the specialty of endodontics; stimulates endodontic research studies among its members; and encourages the highest standard of care in the practice of endodontics.

The AAE provides continuing education courses for practicing endodontists, so they can continue to be knowledgeable about state-of-the-art research, clinical procedures, and technology. Through this advanced knowledge, they can offer patients the very best of endodontic care.

Program Name

AAE Foundation Board of Trustees Meeting

Definite Dates

Saturday, March 24, 2012

City Location

Definite for Chicago

Guestroom Requirements/Reservation Method

Friday, March 23, 2012	18 rooms
Saturday, March 24, 2012	18 rooms
Sunday, March 25, 2012	Departures

The AAE will provide a housing list.

Program Schedule/Requirements:

Saturday, March 24

7:30 – 8 a.m.	Breakfast	21 pp	Buffet
8 a.m. – 5 p.m.	Meeting	21 pp	Conference
10 – 10:15 a.m.	Break	21 pp	
Noon – 1 p.m.	Lunch	21 pp	Buffet
2 – 2:15 p.m.	Break	21 pp	

Other Requirements

- Standard audiovisual (e.g., computer projector, screen)
- Separate Room for Lunch

Requested Concessions

- 1 per 30 comp
- Complimentary meeting space
- One suite upgrade @ group rate

- Two staff rates @ 50% off of group rate
- Two complimentary parking passes
- Complimentary internet access in meeting room

Billing

Room and tax to master account for all participants. Incidentals on own at check out.
All other authorized meeting charges to master.

Approximate Decision Date

January 20, 2012

Send Proposal to:

Meeting Services Manager
American Association of Endodontists
180 N Stetson Ave, Ste 1500
Chicago, IL 60601
800-872-3636
866-451-9020 (fax)
meetings@aae.org

SAMPLE FIRST SPEAKER LETTER, SPEAKER CONDITIONS, SESSION INFORMATION FORM, AND SPEAKER BIOGRAPHY

Date

Salutation:

On behalf of the **NAME OF PLANNING COMMITTEE**, thank you for agreeing to participate in the **EVENT TITLE** of the **ORGANIZATION NAME**, held **DATE** in **LOCATION**.

Session Details

Title: **TITLE**

Date: **MONTH, DAY, YEAR**

Time: **TIME**

SPEAKER INFORMATION

Speaker Conditions

Please carefully review, complete and return the *Speaker Conditions* (enclosed).

Session Information Form

Please complete the *Session Information Form* (enclosed) that includes your session description and three learning objectives, which will be published in the promotional material. Sample *Session Information Form* is also enclosed.

Biographical Information

Please return a short biography in narrative form; do not attach a curriculum vitae. A sample biography is enclosed.

Headshot Photo

Please return a photo suitable for publication (preferred file format: tiff, 300 dpi).

TRAVEL/EXPENSES

Honorarium/Expenses

We have agreed to provide you with the following in honorarium and expense reimbursement:

Air Travel

Please make your air travel arrangements as soon as possible. Your recommended arrival date is **DATE** and departure date is **DATE**.

Hotel Accommodations

We will reserve a **TYPE OF ROOM** on your behalf at the **HOTEL NAME** for a maximum of **NUMBER** nights. Please contact me to confirm your check-in/out dates.

SUMMARY

Please forward the following information to me by **DATE** via e-mail at **E-MAIL ADDRESS**, fax at **NUMBER**, or postal mail to **ADDRESS**.

1. Completed and signed *Speaker Conditions*
2. Session Information Form
3. Biographical Information
4. Headshot Photo
5. Hotel Check-In/Out Dates

If you need any assistance in the meantime, please do not hesitate to contact me at **NUMBER**.

Again, on behalf of the committee, thank you for agreeing to participate, and for your generous contribution of time and effort.

Closing,
Signature and Name

SAMPLE SPEAKER CONDITIONS

ADA CERP Compliance

Prior to the beginning of a presentation, speakers must caution the audience about the potential risks of using limited knowledge when incorporating new techniques and procedures into their practices.

Advertising and Sales

No advertising matter, commercial promotion, solicitation or sales of any type, including instruments and seminars, are permitted in any part of the presentation.

Audiovisual Equipment

Every effort is made to foster enhanced visual presentations and provide its speakers with high-quality presentation equipment and technical assistance. Any images must be projected via a computer. More detailed AV information to follow.

Conflict of Interest

A speaker must provide his/her understanding and disclosure of any conflict of interest, and the prospective audience must be made aware of the affiliation/interest through notice in the program. Having an interest in a product, service, course or company does not necessarily preclude a speaker's participation or affect the status of the speaker. The purpose of collecting this information is to share it with the membership and/or attendees to help them gain perspective on the presentations and to operate within the guidelines of ADA CERP. In deciding what to disclose, speakers should carefully consider whether any particular affiliation(s) could cause embarrassment to the speaker or the American Association of Endodontists, or whether it could lead to questions regarding the speaker's motives if such affiliation(s) were made public. Speakers should exercise particular care that no detriment to the **ORGANIZATION NAME** will result from conflicts between self interest and those of the **ORGANIZATION NAME**.

Initial either Declaration A OR Declaration B:

Declaration A

In accordance with this policy, I declare that I have no proprietary, financial, or other personal interest of any nature or kind in any product, service, course and/or company, or in any firm beneficially associated therewith, that will be discussed or considered during the proposed presentation.

Initials _____ (If you initial here, do not initial Declaration B.)

Declaration B

In accordance with this policy, I declare I have a past or present financial interest/arrangement, consulting position or affiliation with the corporate organization(s) whose product(s) I will discuss in my presentation, as indicated below:

Affiliation/Financial Interest Corporate/Institutional Entity

Grants/Research Support: _____

Consultant: _____

Stock Shareholder (directly purchases): _____

Honorarium: _____

Financial/Material Support: _____

Initials _____

Drugs, Products and Services

Drugs mentioned in presentations should generally be identified by chemical formulae, or by generic or common names except if mention of a trade name is deemed absolutely necessary for identification purposes. Promotion of any specific vendor or any specific product by trade name is absolutely prohibited. Also prohibited are specific mentions of available courses or services.

HIPAA Compliance

Presentation material must meet the Health Insurance Portability and Accountability Act guidelines. These guidelines state that patient records and photos used in teaching must be stripped of all “direct identifiers,” such as name, address, social security number, patient ID number, identifiable photographic images, *etc.* Or, the speaker must have written authorization from the patient to use his/her directly identifiable health information. Presentation materials include, but are not limited to, handouts, visual presentations and reproductions of journal articles.

Publicity and Public Information

A major value of the **EVENT NAME** is its ability to impact public and professional opinions on the specialty and the **ORGANIZATION NAME**. Therefore, it is important that only correct and authenticated information be presented. Any news releases, photographs and interviews with press, radio or television reporters must be handled through headquarters. Sessions are open to the media and therefore, any statements by speakers may be reported in public news media.

Statement of Professionalism

The **ORGANIZATION NAME** strives to present high-quality programs for continuing dental education. A speaker’s presentation material must be relevant and presented in a professional manner within the allotted time. Presentations will be educational in content and free from commercial or promotional bias. Because audiences for these programs come from diverse backgrounds, speakers must be sensitive to everyone in the audience. Members of the profession and its allied fields should be made to feel welcome, safe and comfortable, both psychologically and physically. Speakers should embrace a communication style that is sensitive to differences in gender, ethnicity, age, religion, politics and disabilities. Any harm claimed by a member of the audience shall be the sole responsibility of the speaker. Consequently, speakers should review the content of their presentations and their delivery styles, use inclusive language, and eliminate all inappropriate and offensive remarks.

I agree to be bound by the terms of these conditions as stated above.

Additionally:

Indemnification

I hereby agree to indemnify and hold harmless the **ORGANIZATION NAME** from any and all liability related to the content of my presentation.

Copyright

If your presentation includes content originally developed by someone other than you and taken from a copyrighted source, copyright permission may need to be obtained. You agree to do one of the following:

- a. Obtain permission from the copyright holder; or
- b. Inform the **ORGANIZATION NAME** of the copyrighted content and we will work together to determine if copyright permission is required and to help you obtain it; or
- c. Modify your presentation to conform to copyright law.

Signature of Agreement _____

Date _____

SAMPLE SESSION INFORMATION FORM

Title of presentation: Current Concepts, Future Challenges in Root Canal Instrumentation

Session Description: (Description limited to 75 words or less)

Currently available endodontic instruments usually perform well in clinical settings. Specifically, they allow most root canals to be shaped without major preparation errors. However, clinicians feel that there are issues where improvement is needed. One often cited problem is the potential of instrument fracture, another is insufficient cleaning of canal spaces, eventually leading to post-treatment disease. This presentation will describe concepts that are perceived as current gold standard as well as future directions for improvements.

Learning Objectives: At conclusion, participants should be able to:

- Ⓢ Describe important aspects of current instrument design and application parameters
- Ⓢ List current problems with instrument performance that may alter endodontic outcomes
- Ⓢ Assess the potential for improvement of currently available instruments and techniques in the near and distant future

SAMPLE BIOGRAPHY

Dr. Walton is a native of the Pacific Northwest. He earned his DMD at the University of Oregon in 1965 and a certificate in Endodontics and Masters in Histology at the University of Illinois in 1970. A long-time educator and researcher, he taught at the University of Connecticut and the Medical College of Georgia. He has been at the University of Iowa, serving as Chair for thirteen years and now as Professor. Dr. Walton has published extensively in both the clinical and basic science literature and coauthors the textbook Endodontics: Principles and Practice, now in the 4th edition, with Dr Torabinejad. He has received teaching and research awards at his institution and from the American Association of Endodontics. Dr. Walton recently had an Endowed Professorship established in his name at the University of Iowa.



EVALUATION

IMPORTANT- ATTENDANCE VERIFICATION	Your membership #:	First 4 letters of your last name:	Session verification #:	CE hours: 1.5
	<input type="text"/>	<input type="text"/>	<input type="text"/>	

Session Number:	Session Title:
HTC-100	Apical Diameter — Large vs. Small

Date and Time:	What is your professional status?	Clinician	Educator	Resident	Auxiliary	Number of years in practice:	Less than 5 yrs.	5-10 yrs.	11-15 yrs.	More than 15 yrs.	N/A
Wednesday, April 14, 2010 10:30 AM - 12:00 PM		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Room:											
1											

1. SESSION OBJECTIVES

Please indicate whether the learning objectives were met.

At conclusion, participants should be able to:

	Yes	No
Describe the rationale and research behind the two viewpoints.	<input type="radio"/>	<input type="radio"/>
List the instruments and procedures used to achieve the desired apical preparation outcomes discussed.	<input type="radio"/>	<input type="radio"/>
Make more informed clinical decisions about appropriate apical preparation diameters.	<input type="radio"/>	<input type="radio"/>

2. SESSION CONTENT

	Excellent	Very Good	Good	Fair	Poor	N/A		Excellent	Very Good	Good	Fair	Poor	N/A
Usefulness	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Appropriateness	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Comprehensiveness	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Thoroughness	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Helped to achieve your personal objectives	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Improved your knowledge/competency as a dental healthcare professional	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Was the information presented supported by any scientific evidence, and if so, which of the following levels of evidence were used?

(please check all that apply)

- ☐ Controlled Clinical Trials ☐ Cohort Studies ☐ Case Control ☐ Case Series
☐ Case Reports ☐ None ☐ I am unable to differentiate types of studies

3. SPEAKER EFFECTIVENESS

	Content						Speaking Skills						Printed Materials						Visual Aids						
	Excellent	Very Good	Good	Fair	Poor	N/A	Excellent	Very Good	Good	Fair	Poor	N/A	Excellent	Very Good	Good	Fair	Poor	N/A	Excellent	Very Good	Good	Fair	Poor	N/A	
Speaker Name(s):																									
E. Steve Senia, D.D.S., M.S.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
L. Stephen Buchanan, D.D.S.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

4. COMMENTS

What topics would you like addressed in the future?

General comments/suggestions:

Name/e-mail (optional):

Thank you. Please return your completed form to the room monitor or deposit it in the evaluation receptacle located in the registration and information area.

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SAMPLE SECOND SPEAKER LETTER

TO: **SPEAKER NAME**
FROM: **CONTACT NAME**
RE: **Second Speaker Communication**
DATE: **MONTH, DAY, YEAR**

We look forward to your participation at the **NAME OF PLANNING COMMITTEE**, thank you for agreeing to participate in the **EVENT TITLE** of the **ORGANIZATION NAME**, held **DATE** in **LOCATION**. I am contacting you regarding a few important items for your presentation.

Presentation Date and Time

Title: **TITLE**
Date: **MONTH, DAY, YEAR**
Time: **TIME**

Attached is the program, for your information.

Audio Visual Information

The lecture room will be equipped with **LIST OF AV EQUIPMENT**. If you have any additional AV requests, please let me know.

Handout Material

Presenters are encouraged to provide a handout encompassing the presentation objectives and key points. These materials will be provided to attendees at the meeting. PowerPoint® or Keynote® slides are an acceptable handout form, as well as outlines, references and articles.

Handout material is due no later than **DATE**.

Registration Materials

As a speaker, you are automatically registered for the meeting. Your name badge and registration material will be waiting for you at **EVENT LOCATION** during registration hours indicated in the program.

Hotel Accommodations

We have reserved a **TYPE OF ROOM** on your behalf at the **HOTEL NAME** from **DATE** to **DATE**. Please let me know if would like to modify your hotel accommodations.

Closing

To recap, please forward the following information to me by **DATE**:

- Any additional AV needs
- Handout
- Changes to your hotel check-in/out dates

*Method of submission: via e-mail at **E-MAIL ADDRESS**, fax at **NUMBER**, or postal mail to **ADDRESS**.*

If the AAE can be of additional assistance, please feel free to contact me. Thank you again for participating in the **EVENT TITLE**. We greatly appreciate your effort to make this an exceptional continuing education event!



VERIFICATION OF PARTICIPATION LETTER

William T. Johnson, D.D.S., M.S.
Dept of Endo Col of Dent Univ of IA

American Association of Endodontists
211 E. Chicago Ave., Suite 1100
Chicago, IL 60611-2691

435 Dental Science Bldg S

The American Association of Endodontists verifies that **William T. Johnson, D.D.S., M.S.**, participated in the continuing education lecture/participation course, **2011 Fall Conference - Challenges in Practice: Integrating Endodontics Into Comprehensive Care** - on November 3 - 5, at the The Roosevelt Hotel Waldorf Astoria Collection, in New Orleans, LA.

All information contained on this certificate is truthful and accurate. Speakers were selected because of their expertise and recent lecture experience. Completion of course(s) does not constitute authorization to perform any services he/she is not legally authorized to perform based on license permit type.

CE credits issued for participants may not be applicable for license renewal in all states. Since CE requirements and acceptable credits vary, each participant must verify the requirements of their state licensing board and whether the Verification of Participation Letter should be retained by the participant or sent to the state board.

The American Association of Endodontists is an ADA CERP Recognized Provider and a recognized provider in Florida (#PP0049), with the AGD (#4401) and in California (#2030). ADA CERP is a service of the American Dental Association to assist dental professionals in identifying quality providers of continuing dental education. ADA CERP does not approve or endorse individual courses or instructors, nor does it imply acceptance of credit hours by boards of dentistry. Concerns or complaints about a CE provider may be directed to the provider or to ADA CERP at www.ada.org/goto/ceerp.

ADA CERP® | Continuing Education Recognition Program

Verified by Beverly K. Albert, Assistant Executive Director for Education

Participant Signature		Participant License Number	
Session #	Title	Speaker(s)	CE Hours
FC1	Thursday Sessions (4.0-2030-111101)	David Schwab Ph.D. Shimon Friedman D.M.D.	4.00
FC2	Friday Sessions (3.5-2030-111102)	John S. Olmsted D.D.S., M.S. Richard S. Schwartz D.D.S.	3.50
		Total Credits:	7.50

APPENDIX F

SAMPLE MONTHLY BOOKKEEPING TEMPLATE – AFFILIATE OPERATIONS

Note: A fully-functional Excel template is available to you online at www.aae.org.

Affiliates Template Financial Reporting

	Month	Year to Date	
Commercial Checking			
Any investments			
Total	0.00	0.00	

Cash Reconciliation

Weekly deposits	
1/6/20xx	200
1/13/20xx	100
Total	300

The weekly deposits should equal the amount in the bank.

Income Statement compared to a Budget

	Actual	Month	Actual Year to Date	Annual Budget	ACT. YTD vs. BUDGET
Dues/Member		20.00	20.00	40.00	(20.00)
					0.00
					0.00
					0.00
Other Income					0.00
					0.00
					0.00
Transfer from Reserves					0.00
Total Receipt		20.00	20.00	40.00	(20.00)
AAE Alliance		10.00	10.00	5.00	5.00
AAE Foundation					0.00
Speaker Fees					0.00
Bank Charge					0.00
BOD Meetings					0.00
Conference Calls					0.00
Dues Collection by AAE *					0.00
Gifts/Plaques					0.00
Insurance D&O AAE *					0.00
Office Supplies					0.00
Post Graduate Education Activities					0.00
Postage					0.00
Printing					0.00
Professional Services					0.00
Taxes					0.00
Travel					0.00
Website					0.00
misc.					0.00
					0.00
Total Expenditures		10.00	10.00	5.00	5.00
Net		10.00	10.00	35.00	(25.00)

* cost deducted by AAE

AFFILIATE CONSTITUTION AND BYLAWS TEMPLATES

Constitution

Article 1.Name

Section 1. The name of this association shall be the _____ State Association of Endodontists, hereinafter called "the Association" or "this Association."

Article II.Objectives

The objectives of this Association shall be:

- a) To promote the highest standard of endodontic care for the public.
- b) To be an affiliate association of the American Association of Endodontists.
- c) To represent the specialty of endodontics in the state of _____.
- d) To maintain cooperative relations with the state and local dental societies and other dental specialty organizations.
- e) To provide the public, the media and third party carriers with information and guidance in matter relating to endodontics.

Article III. Membership

The membership of this affiliate association shall be composed of only Active, Educator and Life members of the American Association of Endodontists with the state of _____.

All Active, Educator and Life members of the American Association of Endodontists within the state of _____ shall be eligible for Active membership. No Active, Educator or Life members of the American Association of Endodontists within the state of _____ can be excluded from active membership in this Association. Retired and Resident members can be included if the affiliate chooses.

Article IV. Officers

Section 1. The officers of this Association shall consist of a president, vice president and secretary-treasurer.
Section 2. The duties of the officers shall be those conventionally associated with the official titles and such other duties as the officers or membership may assign.
Section 3. Each officer shall serve for a term of one year or until a successor is installed.

Article V. Meetings

There shall be an annual meeting of the Association. The time and place of said meeting shall be decided upon by the membership or may be delegated by them to the Officers of the Association.

Article VI. Relationship with the American Association of Endodontists

This Association agrees to abide by the constitution and bylaws of the American Association of Endodontists.

Article VII. Amendments

The Constitution may be amended by a 3/4ths vote of the voting membership of the Association present at the annual meeting. Proposed amendments shall be published or distributed to the membership at least 30 days prior to the annual meeting.

Bylaws

Chapter I. Membership Requirements

Members within the state of _____ shall be an Active, Educator or Life member of the American Association of Endodontists.

Chapter II. Ethics and Professional Conduct

The Principles of Ethics and Code of Professional Conduct of the American Association of Endodontists and the American Dental Association shall govern the professional conduct of all members of this Association.

Chapter III. Rights and Privileges of Members

Members shall have all of the privileges of membership, including the right to vote at meeting, to nominate and to hold office.

Chapter IV. Annual Dues

Section 1. Annual dues shall be determined by the officers with the approval of the active members present and voting at the general meeting.

Section 2. Dues are payable by _____ of each year.

Chapter V. Termination of Membership

Each of the following grounds for immediate termination of membership:

- a) failure to maintain Active or Life membership in the American Association of Endodontists.
- b) Failure to pay dues.
- c) Resignation.

Chapter VI. Amendments

The Bylaws may be amended at any annual meeting by action of 2/3rds of the active members present and voting.

Affiliate and District Email Worksheet

AAE AFFILIATE/DISTRICT EMAIL POLICY

Affiliates and Districts are offered the option to send mass emails to their constituents through the AAE Headquarters office for purposes that are currently allowed for use of AAE mailing labels at no fee. Should the Affiliate or District desire to send a mass email to all members for these same purposes, they may also do this through the headquarters office **once per year**. District mass emails must be approved by both Directors.

PROCESS

Affiliate and district emails are managed by the Membership Department. Upon receipt of the request form, the Membership Department will manage the creation and distribution of the email, with input from the requestor.

Affiliate mass emails must be approved by an affiliate officer and reviewed by staff for accuracy and consistency with AAE policy. Affiliate emails will be sent to members from affiliates@aae.org using the affiliate's masthead. Unless otherwise indicated, the message will be sent to members from the affiliate's state only.

District mass emails must be approved by both district directors and reviewed by staff for accuracy and consistency with AAE policy. If there is a question relating to the content of the communication that cannot be resolved by the two directors and staff, it must be voted on by the full Board. District emails will be sent to members from communications@aae.org using the district's masthead. Unless otherwise indicated, the message will be sent to members of the district only.

REQUESTING A MASS EMAIL

- Complete the email request form below and submit it to the membership coordinator at membership@aae.org **at least two weeks** prior to the requested release date.
 - If an affiliate email is not initiated by an affiliate officer, the affiliate president must be copied on the submission.
 - For district emails, both district directors must be copied on the submission.
- Send the email text and any applicable photos or graphics to accompany the message as email attachments.
 - Text must be provided as a Microsoft Word document.
 - All photos must be clearly labeled as a separate document, and you must have the right to use any images you include. Please do not send images that have been pulled from the Internet without permission. Photos must be in either a jpeg or tiff format only.
- You will receive a test email from the membership coordinator for your review/approval. Upon approval, the email will be scheduled for distribution.

Affiliate and District Email Worksheet

REQUEST FORM

<i>Date submitted</i>	
<i>Requesting member's name</i>	
<i>Name/email address of contact to receive/approve test email</i>	
<i>Target send date</i>	
<i>Desired subject line</i>	
<i>AAE members to receive email – please specify which state(s)/district(s) and if any member types should be excluded</i>	
<i>Text for email message – please list file name and include your text as an attachment</i>	
<i>Are you including images with your email? If yes, specify file names.</i>	
<i>Additional instructions</i>	