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**IFSO Endorsement of Webinars in the field of Obesity and Metabolic Disorders**

Endorsement requests must be sent to IFSO Secretariat (info@ifso.com) together with the scientific program of the Webinar. IFSO-Communication Committee will carefully review the concepts and objectives of the Webinar as well as the faculty, the structure and content of the Webinar, in deciding about the endorsement.

“Endorsement” does not in any way offer credentialing of grant approval to the participant regarding future skills and outcomes.

* **Requirements**

􀀀 The complete application has to be received at latest 2 weeks prior to the event. Applications received less than 2 weeks before will be automatically rejected.

􀀀 The Webinar must be directed or coordinated by an IFSO member

􀀀 Endorsed Webinars should possibly offer CME credits (not mandatory)

􀀀 The Director/Organizer must ensure that disclosure of conflict of interest are enforced

􀀀 The Director/Organizer must show in his/her presentation(s) the Case Mix Disclosure slide (see attached) and recommend its use to all the speakers.

􀀀 Reduced registration fees (if any) must be granted to IFSO Members

􀀀 A detailed PDF file of the scientific program with titles of presentations and faculty must be provided at the time of application.

* **Fees**

INDIVIDUALS: $100,00

CORPORATE: $500,00

* **Benefits:**

Endorsed Webinars will be:

􀀀 listed on IFSO’s Website on the “Endorsed meetings” page with the link for the registration

􀀀 included on IFSO’s E-newsletter

􀀀 mailed once to IFSO Members

􀀀 advertised once on IFSO Facebook page

􀀀 the Director may include IFSO’s Endorsement statement and IFSO Logo on promotional materials among the endorsing institutions, exclusively with the following text: “***Endorsed by***” before the logo of IFSO.

* **People’s first language:**
* Use patients with obesity, people with obesity, woman/man/child with obesity
* Use severe obesity (or reference BMI range or Class), never morbid obesity or super-obesity or extreme-obesity
* Eliminate "success/failure" "recidivism" "non-compliant" "gold-standard" "last-resort" sort of language
* Avoid weight-loss surgery, instead use bariatric-metabolic surgery
* Imagery (no headless, stereotypical/stigma = takeaway boxes, fast food, ill-fitting clothes, etc.)
* **Diversity statement:**

IFSO encourages diversity such as gender, age and geographical representation. Therefore, we encourage to take into account diversity in selecting the faculty of your educational events.

If you think your Webinar fulfils the above mentioned requirements, please send your request to info@ifso.com by filling the following form together with a PDF file of the scientific program.

After the approval of the Communication Committee you will receive further instructions about the payment of the endorsement fee.

**IFSO Webinar endorsement application form**

EVENT DIRECTOR\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

INSTITUTION/SOCIETY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

TITLE OF THE EVENT\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DATE\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_o\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

TYPE OF EVENT: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Website/platform \*:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CITY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ STATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ZIP: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PHONE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ FAX: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-MAIL\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

WILL CME CREDITS BE OFFERED? \*\_\_ YES \_\_ NO IF YES, HOW MANY?\*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

IF NO, WHY?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

WHICH INSTITUTION PROVIDES THE CME CREDITS:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ARE DISCLOURES OF CONFLICT OF INTEREST ENFORCED?\* \_\_\_\_YES \_\_\_\_\_NO

DISCOUNT FOR IFSO MEMBERS (min 10%)\*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*Mandatory field

**BILLING INFORMATION**

Name (person/company/institution): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date Signature Event Organizer

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_