



# Committee Interest Application

Please complete the below application to submit your interest in serving on an OAC Committee.

Name: \_\_\_\_\_ Title: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

Occupation: \_\_\_\_\_

- Are you a member of the OAC's community?  Yes  No
- Are you willing to promptly disclose any conflicts of interest?  Yes  No
- Are you willing to sign a confidentiality agreement?  Yes  No

## Please Select the Committee(s) which You are Interested in Applying (*you may choose more than one*):

- OAC Education Committee**
- OAC Advancement and Development Committee**
- OAC Membership Committee**
- OAC Weight Bias Task Force**
- OAC Medical Tourism Taskforce**
- OAC Access to Care Committee**
- Committees of the OAC National Convention-**  
*Ad Hoc Committees: Program Agenda Committee; Subcommittees – Welcome Committee, Scholarship Committee*

Once you have selected the committee(s) of interest to you, your interest will then be sent to the respective Committee Chair for consideration. Please note that not all committee have openings at this time, however your interest will be kept on file for future consideration.

### Return Completed Application to:

**Email:**  
[bdelvalle@obesityaction.org](mailto:bdelvalle@obesityaction.org)

**Mail to:**  
Obesity Action Coalition  
4511 N. Himes Ave., Suite 250  
Tampa, FL 33614

**Fax to:**  
(813) 873-7838