**2024 NC NEUROLOGICAL SOCIETY ANNUAL MEETING**

**Resident/Fellow/Student Poster Session Abstract Submission**

Submission deadline: December 1, 2023

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Presenter: | | | |  | | |  | | | Credentials: ⬜ MD ⬜ DO Other: \_\_\_\_\_\_\_ | | | | | | |
| Affiliation/School: | | | | |  | | | | | | | | | ⬜ Student ⬜ Resident/Fellow | | |
| Email: | |  | | | | | | | | | | | |  | | |
| Address: | | |  | | | | | | | | | | | | | |
| City: |  | | | | | | | State: | | |  | | Zip: | |  | |
| Business Telephone: | | | | | |  | | | Fax: | | |  | | | | |
| **Poster Title:** | | | | | | | | | | | | | | | |
| Type here. This space will expand. | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | |
| **Poster Abstract:** | | | | | | | | | | | | | | | | |
| Type here. This space will expand. | | | | | | | | | | | | | | | | |

**Please return this form by December 1, 2023 to:**

Megan Eberle

NC Neurological Society

Via email (preferred): [meberle@ncmedsoc.org](mailto:meberle@ncmedsoc.org)

PO Box 27167, Raleigh, NC 27611 or FAX: (919) 833-2023