
CHANGE OF ADDRESS

*American
Osteopathic Board of
Orthopedic Surgery*

The American Osteopathic Board of Orthopedic Surgery recognizes that your address may change frequently during your training. It is extremely important that we are able to keep track of your address during the Board certification process.

Please return the enclosed form any time you have a change of address **OR** need to notify the Board of any new information.

Name _____, D.O. Date _____

AOA Number _____

Former Address _____

City _____ State _____ Zip _____

New Address _____

City _____ State _____ Zip _____

Phone _____ FAX _____

E-mail _____

New address current as of _____

Please return this form to:

AOBOS
800 Military Street
Suite 307
Port Huron, MI 48060

Fax: (810) 984-2530
E-mail: aobos@aobos.org
Web: www.aobos.org