



To: OTA USA Military Members

Per the bylaws, "Orthopaedic Trauma Association USA members of any category, may apply for a waiver of dues while on active military duty. The member must submit written documentation from their commanding officer indicating the member was on active military duty for during a portion of the calendar year for which the waiver is requested" (Article V, Section XVIII).

Please complete this form and fax, email or mail to the OTA staff office at: [ota@ota.org](mailto:ota@ota.org), or 847-430-5140 (fax).

If you would like to review the bylaws, login to the [Member's Only page](#):

I, \_\_\_\_\_, verify that  
(Commanding Officer)

\_\_\_\_\_ (OTA Member) will be active duty military in \_\_\_\_\_ (Active duty year of service)

\_\_\_\_\_  
(Commanding Officer Signature) (Date)

Sincerely,

A handwritten signature in black ink that reads "Brendan M. Patterson" followed by a horizontal flourish.

Brendan M. Patterson, MD  
OTA President