

Allergy & Rhinology

OceanSide Publications, Inc.

450 Veterans Memorial Parkway #15 ~ East Providence, RI 02914

401-331-2510 (phone) ~ 401-331-0223 (Fax) ~ oceanside@oceansidepubl.com

Publication Rights Agreement

(Each author listed on the title page must complete and return this form at the time of manuscript submission.)

In consideration of Ocean Side Publications, Inc. ("Ocean Side") evaluating the manuscript, including all tables, graphs, and photos which form a part thereof, entitled: _____

(Manuscript number # _____) hereafter referred to as the "Work," for publication in the Open Access journal *Allergy & Rhinology* and possibly publishing the Work, the undersigned author(s) agree to the assignment of the following Publication Rights, for both electronic and print versions of the Work, in the event the Work is published.

Allergy & Rhinology (A&R) is an Open Access journal, which publishes under the [Creative Commons License Deed](#). In the event the Work is published, the author(s):

- 1) agree to and accept the terms of the [Creative Commons License Deed: \(Attribution - Non-Commercial - International 4.0 Unported \(CC BY-NC 4.0\)\)](#).
- 2) agree to and accept the A&R Terms and Conditions of Use;
- 3) retain the copyright privileges to their Work;
- 4) grant the Publisher exclusive license and rights for all "commercial" use regarding the Work. For the purposes of this agreement, "commercial use" means use in any manner that is primarily intended for or directed toward commercial advantage or monetary compensation.

Each of the undersigned warrant(s) that: a) he or she has full power to enter this agreement; b) the Work is original Work in which they have participated in writing; c) neither this Work nor a similar manuscript has been previously published (except in abstract form); d). this Work is not currently under consideration by another journal; e) the Work shall not be submitted for publication elsewhere while under consideration by *Allergy & Rhinology*; and f) the Work does not infringe upon any copyright or other proprietary right of any third party.

Note: The Editor may refuse to consider manuscript submissions from any author who has previously had a manuscript rejected by *Allergy & Rhinology* for reasons of plagiarism, undisclosed conflicts-of-interest, inappropriate authorship, fraud, or duplicate publication.

Signature: _____ Date: _____

Printed name: _____

Signature: _____ Date: _____

Printed name: _____

Signature: _____ Date: _____

Printed name: _____

Signature: _____ Date: _____

Printed name: _____

Allergy & Rhinology

OceanSide Publications, Inc.

450 Veterans Memorial Parkway #15 ~ East Providence, RI 02914

Publication Rights Agreement pg 2

Title: _____

Manuscript number # _____

Signature: _____ Date: _____

Printed name: _____

Signature: _____ Date: _____

Printed name: _____

Signature: _____ Date: _____

Printed name: _____

Signature: _____ Date: _____

Printed name: _____

Signature: _____ Date: _____

Printed name: _____

Signature: _____ Date: _____

Printed name: _____

Signature: _____ Date: _____

Printed name: _____

Signature: _____ Date: _____

Printed name: _____

Authors on multi-authored manuscripts have the option of submitting this agreement individually; however, the review process will not commence until all signatures are received. Forms may be mailed to the above address, emailed, or faxed to the number below.
at 401.331.0223 E-mail compliance@oceansidepubl.com

Allergy & Rhinology

OceanSide Publications, Inc.
450 Veterans Memorial Parkway, Bldg.15
East Providence, RI 02914

Conflict of Interest

Allergy & Rhinology requires all authors to acknowledge in the title page of their manuscript all funding sources that supported their work as well as all institutional or corporate affiliations of the authors. Authors are also required to disclose to the Editor, in a covering letter at the time of submission of their manuscript, any commercial associations that might pose a conflict of interest. These include consultation arrangements, stock or other equity ownership, patent licensing arrangements or payments for conducting or publicizing the study. The disclosure will be held in strict confidence during the review process and will not influence any editorial decisions. However, if the paper is accepted for publication, the Editor will determine how any conflict of interest should be disclosed.

Name of Author: _____

Address: _____

Manuscript Title: _____

Manuscript AR#: _____

Check One:

I have no actual or potential conflict of interest in relation to this paper.

Signature: _____ Date: _____

I have a financial interest/arrangement or affiliation with one or more organization(s) that could be perceived as a real or apparent conflict of interest in the subject of this paper.

Affiliation/Financial Interest Name of Organization(s)

Grant/Research Support _____

Consultant _____

Speakers' Bureau _____

Major Stock Shareholder _____

Other Financial or Material Support _____

Signature: _____ Date: _____

Note: Each author listed on the title page must complete and return this form prior to publication.

Allergy & Rhinology
OceanSide Publications, Inc.

450 Veterans Memorial Parkway, Bldg. 15
East Providence, RI 02914 USA
Phone 401.331.2510
Fax 401.331.0223
E-mail compliance@oceansidepubl.com