PRESENTER PROPOSAL FORM

We appreciate your interest in presenting a workshop to be held during the 10th Annual NATHPO Meeting. Please understand that we cannot guarantee that you or your organization will be chosen as a presenter. Presenters will be selected dependent upon time constraints, meeting theme and material content.

**Presenter(s) Name(s):**

Subject Area (check all that apply):

- [ ] Legal
- [ ] Compliance Issue
- [ ] Training and Technical Assistance
- [ ] Other (please suggest subject area):
  
**Audience:** Who directly benefits? (please be specific)

**Indicate Your Presentation Format:**

- [ ] Lecture; Direct Teaching
- [ ] Multimedia
- [ ] Panel
- [ ] Discussion; Question & Answer

**Title and Description of Your Session:**

The title and description should accurately reflect the content, activities, and anticipated outcomes of your session. Write your outcomes in clear terms and be specific. We reserve the right to edit titles and descriptions for use in the registration materials. Attach a separate piece of paper if necessary.

**Proposed Title:**

**Description:**

_________________________________________________________________
_________________________________________________________________
Coordinator Information:
Name: _______________________________
Organization: ________________________
Position: ______________________________
Address: ______________________________
City: __________________ State: ________ Zip Code ________
Main telephone number (please note if this is a cell phone): ________________________
Fax number (including area code): ________________________
Email address: ________________________

IMPORTANT! PLEASE NOTE: We assume the individual listed above will serve as the primary contact for all correspondence regarding presentation acceptance, scheduling, changes, room notification, and equipment requests. It is the responsibility of this person to communicate in a timely manner all information. NATHPO meeting planners will make every effort to place your session in a meeting room that best meets your needs. To assist in accommodating your requirements, please complete this form, being as specific as possible. Your equipment needs will be verified upon the acceptance and confirmation of your presentation proposal. Note: There are a very limited number of LCD projectors available.

Attendance: What is the maximum number of participants with whom you can work effectively for your session?

_____

Audiovisual Equipment: Please check the equipment you will need for your presentation.

_____ Flip Chart with paper and markers
_____ PA system
_____ TV and Video Player (which kind)
_____ CD player
_____ LCD projector (note any special requirements)___________
_____ Screen
_____ Overhead projector
_____ Speakers for multimedia presentation
Please indicate if you are bringing your own laptop computer__________

Meeting Room Set Up:

_____ Podium
_____ Head Table _________ Number to be seated at the head table
_____ Informational materials table

Note: We will do our best to accommodate your request for meeting room set up. However, due to space available, we reserve the right to adjust the set up.

Please mail, fax, or email form to:
Ms. D. Bambi Kraus
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Washington, DC 20036-9189
Fax (202) 466-7706   bambi@nathpo.org