

Company

Speaker Information (Limit two per session)

15th Annual Native American Training

Professional Education for Behavioral Health Professional
"Embracing our Communities to Sustain a Healthy Circle of Life"

June 15th-20th Education Program | June 16-20th, 2025 | June 19th Pow-wow

SPEAKER APPLICATION

Submit ONE application for each session | Email to: Ramus Suina at rsuina47@gmail.com

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	Primary Presenter	Co-Presenter		
Name				
Email Address				
Phone Number				

Mailing Address	
City, ST, Zip	
Session Informa	ation
Session Title	
Description	
Set-Up (choose one)	Classroom Style Theater Style (no tables) Circle of Chairs Other:
Audio Visual	Podium and Microphone complimentary Screen and LCD Projector complimentary, please bring your own laptop Flip Chart and Markers complimentary DVD Player available on order and will be expense of speaker Wireless Microphone (lavaliere or hand-held) available on order and will be expense of speaker

Certification

I, the above applicant(s), understand that the session provided will be in accordance to the description submitted, classrooms are non-commercial forums and will not sell any product/service during that time. Information submitted, including description and bios may be edited by NATI for the program guide. I understand that participating as a non-compensated speaker and I will be responsible for all travel related expenses, including registration fees, and will not be reimbursed by NATI. I understand that copier will not be available, therefore will bring my own printed hand-outs. I give permission and ownership to NATI to use, duplicate, reproduce and distribute any photographs, video, audio or other recording that are made during the course of the event.

Speaker Signature:	Date: