2019 LCIRSA Fitness Expo Presentation Proposal Form

Please complete this form in full and submit it electronically.

Paper applications not accepted.

\*Lead Presenter:

First & Last Name \_\_\_\_\_\_\_

Presenter Email \_\_\_\_\_\_\_\_\_\_\_

Presenter Phone Number \_\_\_\_\_\_\_\_\_

Sponsoring Institution \_\_\_\_\_\_\_\_\_\_\_

Coordinator Name \_\_\_\_\_\_\_\_\_

Coordinator Phone Number \_\_\_\_\_\_\_\_\_\_

Coordinator Email \_\_\_\_\_\_\_\_\_\_\_

\*Co-Presenter:

First & Last Name \_\_\_\_\_\_\_\_\_

Sponsoring Institution \_\_\_\_\_\_\_\_\_\_\_

Coordinator Name \_\_\_\_\_\_\_\_\_

Coordinator Phone Number \_\_\_\_\_\_\_\_\_\_

Coordinator Email \_\_\_\_\_\_\_\_\_\_\_

\*Brief Presenter & Co-Presenter Biography

Please be sure to include certifications, qualifications related to presentation, related experience, and number of years teaching/training.

\*Title of Presentation \_\_\_\_\_\_\_\_

\*Type of Presentation:

Group Exercise/Fitness Class

Lecture

Workshop (combination)

\*Presentation Track – check all that apply:

Group Exercise

Health, Wellness, Nutrition

Personal Training

Administration/Management/Marketing

\*Detailed Description of Presentation:

\*List 2 major learning objectives of your presentation:

1.

2.

\*Check the appropriate facility required for your presentation:

Group Exercise Studio (hardwood floors and mirrors)

Double Gym (hardwood floors and large court space)

Spin Studio (21 Star Trac Spin bikes)

Classroom (with AV capabilities)

\*Other facility requests that you may have: