NHSLHA

Conference Speaker Agreement

Date of Conference:		**Please complete and return to:** Lisa Minahan speech.teach@comcast.net
Location of Conference:	Courtyard Marriott & Grappone Conference Ctr. Concord, NH	
Estimated # of Attendees:	250+	
Contact:		

1. Speaker Information

Name:	
Address:	
Mobile Phone:	
Fax:	n/a
E-Mail:	
Home Phone:	n/a
Fee:	___: $_____ per hour __X__: I will be donating my time

2. Presentation Information

Title of Presentation:	
Description:	
Learner Objectives: *(this information is **required by ASHA** for CEUs)* (Minimum of 4):	

Length of Presentation:	**1 hour**	• **2 hours**	• **3 hours**	• **6 hours**	• Other:

3. The tentative **Schedule** is as follows. Please fill in the blanks with topic *(this information is **required by ASHA** for CEUs.)*

7:15-8:00	*Registration*
8:15 – 9:30	
9:40-11:00	
11:00-11:15	
11:20-12:20	
12:25-1:30	
1:35-2:35	
2:35-2:55	
3:00-4:00	
4:00-4:15	*Closing Remarks, CEU Certificates*

4. Equipment Requests

Computer		Microphones:		Other Equipment*: NONE	
LCD Projector		Handheld			
Laser/Clicker		Lavaliere			
HDMI cable				(these cannot be guaranteed*)	

5. Travel and Accommodations will be covered at reasonable and customary rates, only if discussed and agreed upon in advance. N/A

Accommodations:
Shuttle/transportation needed:

6. Handouts will be distributed to attendees via email.
Please send electronic copies to (your email address) at least one week prior to the conference.

7. Other pertinent information or requests

8. Please attach a **BRIEF BIOGRAPHY** (Word Document) and **PHOTO (not needed)** (JPEG or PNG) for the conference brochure and return by:

Speaker signature	Date

If you have any questions regarding this contract, please contact: Lisa Minahan 603-548-2188 speech.teach@comcast.net or *NHSLHA P.O. Box 832 Concord, NH 03302-1538 603-228-5949 nhslha@gmail.com*

(you may want to add your contact information here)

Submit Button