



Presenter Information Form
Aging with Attitude Regional Expo
Iola, Kansas
April 27, 2018.

Please complete this form by **November 15th, 2017**.
Contact **Melissa Frantz** at mfrantz@sekls.org if you have additional questions or presenter needs.

Thank You

1. Presenter Contact Information

Name

Professional Title

Address

City/State

Zip Code

Phone

Email Address

2. Presentation Title and Description

Title

Presentation/Session Description

3. Your topic will be repeated in two consecutive sessions. Please indicate your scheduling preference for your sessions:

Morning Sessions (10:00 a.m. - Noon)

Afternoon Sessions (1:30 p.m. - 3:30 p.m.)

Either Session Time works for me.

4. Equipment Needs

- Laptop Computer
- LCD Projector
- Projection Screen
- Electrical Cord
- Internet Connection
- Additional Needs

5. **You will receive a complementary lunch.** Do you plan to join us for lunch?

- Yes
- No

6. In addition to speaking, would you like to set up a **free** vendor booth at the resource fair? Also, lunch for a co-worker for your vendor booth is available. Please indicate if an additional lunch is needed?

- Yes, I want a FREE vendor booth
- No, I do not want a booth.
- Yes, I am requesting an additional lunch for a co-worker for my booth.

7. If requested, a mileage stipend can be paid at the current state rate up to \$50.00.

- NO, I am not requesting mileage reimbursement.
- YES, I am requesting mileage reimbursement.
- If yes above, what is the round trip mileage? List below.

If you have additional presenter needs, please contact:

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