



Presenter Information Form
Aging with Attitude Regional Expo
Iola, Kansas
April 28, 2017.

Please complete this form by **November 15th, 2016.**

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. I prefer my session to be scheduled during the:

- ☐ 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. 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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