



Acting Executive Secretary, Mae Lansford
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2019 FALL CONFERENCE
October 11-13th, 2019

INN AT GRAND GLAIZE
Lake of the Ozarks
CONFERENCE SPEAKER CONFIRMATION

Name:

Address:

City/Town/Zip:

Phone #: Work:

Fax:

E-mail:

Credentials:

Date(s)/Time(s) Presenting:

Topic(s):

Total Hours Speaking:

Audio/Visual: Please specify A/V items needed for your presentation:

___ Dry Erase board ___ Flip Chart

___ PowerPoint (video projector) Laptop computer will need to be furnished by the speaker.

Note: If you need copies of handout(s) for your presentation(s), please send them to Ronnie as soon as possible and I will copy them for you. (no later than 2 weeks prior to conference)

Speaker's Signature:

Please review/complete this form, sign and return it (**with a short 50 work biography , a Photo of yourself, company you work for**) and brief description of course objectives) to:

Mae Lansford, Acting Executive Secretary P.O. Box 71, Owensville, MO 65066

Any questions, please contact: Mae Lansford Email: maca@socket.net Phone: 417-554-1412

SPEAKER REIMBURSEMENT OPTIONS

= = **Choose ONE** of the following = =

- _____ Waiver Conference Registration
- _____ \$50/hr Speaker Fee
- _____ No reimbursement needed. It is my contribution to
The profession and MACA
- _____ Vendor Booth/Sponsorship