

SPEAKER'S FORM

Fall Conference 2005

The Penn Stater Conference Center • September 26 -28, 2005

Name/Title: _____

Date/Time Speaking: _____

Presentation Title: _____

TRAVEL ARRANGEMENTS:

Mode of Transportation: _____
(Indicate airline/flight #'s)

Arrival Date: _____ Arrival Time: _____

Departure Date: _____ Departure Time: _____

Will transportation be needed from the airport YES NO

Will you require overnight accommodations? (PACVB to make reservations) YES NO

AUDIO VISUAL EQUIPMENT NEEDED:

- | | |
|--|---|
| <input type="checkbox"/> LCD projector | <input type="checkbox"/> Overhead projector |
| <input type="checkbox"/> 35 mm. slide projector | <input type="checkbox"/> Podium with mike |
| <input type="checkbox"/> Flip chart | <input type="checkbox"/> Lavalier with mike |
| <input type="checkbox"/> Screen | <input type="checkbox"/> VCR |
| <input type="checkbox"/> Easel | <input type="checkbox"/> Monitor |
| <input type="checkbox"/> Internet Access | |
| <input type="checkbox"/> Other special equipment (specify below) | |
- _____
- _____

***Please include a biography for the workshop literature
and an introductory paragraph of 25 words or less.***

Any handouts? YES NO (125 copies requested)

PACVB to make copies of handouts? YES NO

Please send material to be copied to PACVB by **September 2, 2005**

If possible, please provide copies of any PowerPoint presentations.

Return this form to: PA Association of Convention and Visitors Bureaus
128 Locust Street, Lower Level
Harrisburg, PA 17101
info@pacvb.org



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