

PRESENTER APPLICATION FORM

If accepted, your registration includes a 10-minute showcase time slot, presenters' resource table (shared), admission to the trade show, refreshments, list of attendees, your evaluation comments and a great day of professional presentations. A committee will review all applications in early 2010.

Your name		Title	
Company name			
Mailing address			
City	State	Zip	
Phone ()	Fax ()	Guest? Name	
E-mail address			
Web address:			
Title of your talk:			
Contact info as you wish it t	•••••••••••••••••••••••••••••••••••••••	ım book:	
Please attach your bio and a			
Exhibit space/merchandisin We supply two 8-ft draped tables for accommodate you, space permitting.		se let us know if you want more spacewe will tr	y to
0	1	d mic or gooseneck w/ lectern. Shared t to introduce you. No A/V allowed.	
or Word doc). Program is prir	² X 11 camera ready one nted in black and white. sful applicants. Rememl	and this application. -sheet for the program book (hard copy, F We will print what you give us by the per, part of this process is professionalism	
DO YOU HAVE ANY QUEST	IONS?		

SEND HARD COPY OF APPLICATION TO: Marney Roddick OEC State Coordinator 875 Union St NE, Room 301 Salem, OR 97311

For more information, please contact Marney Roddick, OEC state coordinator, 503 947-1305. <u>Marney.Roddick@state.or.us</u> or fax 503 947-1309 (no cover sheet) <u>www.WorkingInOregon.org/oec</u>