

SPEAKER AGREEMENT

Name of event

Location

Date

DEADLINE: COMPLETE AND RETURN THIS AGREEMENT, INCLUDING SESSION DESCRIPTION AND BIOGRAPHICAL SKETCH, BY (INSERT DUE DATE.)

(Please type/print your name, title and organization, as you want them to appear in the conference brochure.)

Speaker Name: _____

Academic Degree/Accreditation: _____

Job Title: _____

Company/Organization: _____

Address: _____

City: _____ State/Province: _____

Country: _____ ZIP/Postal Code: _____

Phone: _____ Fax: _____

E-mail: _____

Cell Phone (for on-site emergency reasons only): _____

1. Confirmation of dates and times

It is agreed that **INSERT NAME** will present "**INSERT SESSION TITLE**" as a breakout session at **INSERT EVENT NAME**.

Insert date

Insert session time

2. Brochure and/or web site information

Session Title and Description: Please provide a session title and session description that can be used for promoting the conference. Session description should be one paragraph in length and include three bulleted learnings.

Biography: Please provide a one-paragraph biography to use in our marketing materials.

3. Handouts: *(Mark these deadlines in your calendar)*

Please send your electronic handouts to IABC in Microsoft PowerPoint, Word or Excel format (will be converted to PDF by IABC for inclusion in flash drive distributed to attendees) **no later than (INSERT DEADLINE.)**

By accepting this contract you agree to provide IABC with your electronic presentation handout, which will be distributed to all attendees. It should be no larger than INSERT SIZE and in Microsoft PowerPoint, Word or Excel format. Handouts will be posted on a secure web site for use only by registered attendees who will be encouraged to make personal copies to bring to the conference. The presentation will also be posted after the

conference. Handouts are strongly recommended as speakers who provide handouts tend to be rated significantly higher by conference attendees than those who do not offer handouts.

4. Conference Presentations (PowerPoint)

Please bring your presentation on-site to the conference on a memory stick/flash drive. IABC will have laptops (Dells) on-site in the meeting rooms for your use during your session. You may also opt to use your own computer. If you use a Macintosh, please bring the correct cables/adapters to eliminate font and other formatting issues. Please confirm with NAME OF EVENT ORGANIZER if you will use your own laptop or IABC's Dell laptop.

5. Room set-up:

Sessions will be set **INSERT ROOM SET-UP INFORMATION.**

6. Audio-Visual:

Session room will have a standard audiovisual set that includes **INSERT AV INFORMATION. (GENERALLY IABC PROVIDES an LCD projector, laptop, screen and lavalier microphone depending on the room size)** paid for by **INSERT NAME OF CHAPTER/REGION.**

7. Expenses:

INSERT SPECIFIC INFORMATION ON WHAT YOUR CHAPTER OR REGION WILL/WILL NOT OFFER INCLUDING TRAVEL, STIPENDS OR SPEAKER FEES. IF YOU ARE COVERING TRAVEL, WE SUGGEST BEING SPECIFIC ABOUT WHAT YOU ARE WILLING TO PAY FOR IE: AIRFARE (ECONOMY/BUSINESS/FIRST,) GROUND TRANSPORTATION (TAXI/SHUTTLE/LIMO) AND MEALS. HERE IS THE VERBIAGE GENERALLY USED AT IABC HEADQUARTERS WHEN WE ARE NOT COVERING ANY EXPENSES: IABC is not responsible for travel, hotel or incidental expenses incurred by the speaker while participating in this program. IABC gratefully acknowledges your support of the association and the communication profession.

8. Cancellation:

If you are unable to keep your commitment to speak because of an emergency, please notify **INSERT NAME AND CONTACT INFORMATION FOR EVENT ORGANIZER** immediately. If you suggest a replacement speaker, in order to be considered and approved by **INSERT NAME OF CHAPTER OR REGION**, he/she must meet all of **INSERT NAME OF CHAPTER OR REGION's** requirements, including providing speaker evaluations that meet our criteria. **INSERT NAME OF CHAPTER OR REGION** reserves the right to cancel presentations at this event.

Agreed and accepted:

Speaker Signature (Typed if using e-mail)

Date

INSERT CHAPTER/REGION REPRESENTATIVE NAME Signature

Date

Please sign and return this agreement to **INSERT NAME AND CONTACT INFORMATION FOR EVENT ORGANIZER by INSERT DUE DATE.**