

**Brain Injury Association of Oregon**  
**Speaker Assignment & Information Form**  
**10<sup>th</sup> Annual Pacific Northwest Conference on Brain Injury 2012**

*Living with Brain & Spinal Cord Injury & Disease:  
Striving for Excellence*

**The Sheraton Portland Airport Hotel, Portland, OR**

**March 1-3, 2012**

Return completed form to the BIAOR office c/o Annual Conference 2012, PO Box 549, Molalla OR 97038  
Phone: (503) 740-3155 Fax: (503) 961-8730 Toll free: (800) 544-5243 Email: [biaor@biaoregon.org](mailto:biaor@biaoregon.org)

This form is for use by BIAOR Program Planning Committee members to document details regarding speaker assignments. One form must be completed for EACH speaker, presenter, or panelist. **This form is needed by February 15, 2012 (Also Attach Curriculum Vitae or Resume for CME requirements and Brief Biographical Statement for the program and website).**

Speaker: First Name (\_\_\_Dr. \_\_\_ Ms. \_\_\_ Mr. \_\_\_ Mrs.) Last Name

Agency/Company Name: Speaker's Professional Title:

Street Mailing Address: City: State: Zip Code:

Area Code & Phone No.: Area Code & Fax No.: Email:

Title of Presentation: Length (in minutes) Preferred Date of Presentation: Preferred Start Time:

Brief Description of presentation:

**Please provide the following additional information:**

- Complete check list of A/V & ADA needs (below)  Presentation Synopsis & Summary Outline (for CEU's)  
 Brief Biographical Statement  Videotape/Audiotape Release Form  Materials for CDs (by February 15)  
 Conflict of Interest Form

<p>AUDIOVISUAL EQUIPMENT NEEDS: Each room will have a podium, microphone, laptop computer and projection screen. We will need to arrange for other equipment. Please indicate your needs below:</p> <p><input type="checkbox"/> Standing Podium <input type="checkbox"/> Table Top Podium <input type="checkbox"/> Podium Mic <input type="checkbox"/> Standing Mic <input type="checkbox"/> Lapel Mic <input type="checkbox"/> <input type="checkbox"/> Draped &amp; skirted presentation table</p>	<p>AUDIOVISUAL EQUIPMENT NEEDS (CONTINUED):</p> <p><input type="checkbox"/> Other Items (describe):</p> <p>_____ _____ _____ _____ _____</p>
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