ATA 49th Annual Conference

Speaker Audiovisual Request Form

Please complete this form by **September 26, 2008** to ensure a successful presentation.

ATA Membership No.: _____ (If you are not an ATA Member, leave blank.)

Session Code: _____ (example: ATA-1)

Speaker Name: _____

Speaker Email: _____

Presentation Title: _____

☐ **I do not require any audiovisual equipment**

☐ Overhead Projector, Markers, and Screen

☐ LCD Projector (projects laptop screen) and Screen ***(Note: You must provide laptop.)***

☐ Flip Chart and Markers

☐ Other special equipment needed (please specify):

_____

Comments: _____

_____

Notes:

1. If requesting an LCD Projector, you must provide your own laptop.
2. Internet access is not available.
3. Onsite audiovisual requests are not accepted.
4. This form must be submitted by **September 26, 2008**.

If you have any questions, please email Teresa Kelly at teresak@atanet.org

Please complete and return this form to ATA, 225 Reinekers Lane, Suite 590, Alexandria, VA 22314 USA or by fax +1-703-683-6122.