

Youth Leadership Conference 2009

Workshop Proposal

Please fill out one form PER proposal. Duplicate this form as necessary

Contact Person Name: _____

Organization, Agency or Team Name: _____

Address: _____

Work Phone Number: _____ Fax Number: _____

Cell Phone Number (for contact on day of event ONLY): _____

Email Address: _____

Additional Workshop Presenters:

Name	Title	Youth or Adult
_____	_____	_____
_____	_____	_____
_____	_____	_____

Would you like your name and contact information to be listed in our participant's manual and on our website? Yes Yes, with limitations below No

Limitations to listing in manual and website _____

I am interested in presenting this workshop on:

- Saturday, February 7 at Perimeter Church in Duluth
- Saturday, March 7 at Mitchell County High School in Camilla
- Both

Our conference has a limited budget, and we attempt to secure speakers who are willing to donate their times and talents. Please list any honorarium, travel or other expenses you require reimbursement to cover.

If available, are you (and co-presenters) interested in conference t-shirts?

- Yes (indicate size(s) needed _____) No

Workshop Title: _____

Workshop Description (Please write a 3-5 sentence description of your workshop to be included in participant registration information to assist in workshop selection.):

Preferred Frequency of workshop:

_____ I am only able to teach my session one time on the date(s) indicated.

_____ I am able to teach my session multiple times if needed.

Preferred Workshop Time:

Please indicate which time slot(s) you would prefer.

_____ Session 1, 10:15-11:10 am

_____ Session 2, 11:20 am -12:15 pm

_____ Session 3, 12:15-1:10 pm

_____ Session 4, 1:20 -2:15 pm

_____ Session 5, 2:25-3:20 pm

_____ No Preference

Preferred Audience:

_____ Middle School Students

_____ High School Students

_____ Adults Only

Preferred Size:

_____ Large Group (50-200 students)

_____ Classroom size (15-25)

_____ No preference

_____ Other: _____

Requested Room Set Up:

Please know that we will do our best to meet your needs, but cannot guarantee that requests will be met.

_____ Classroom style (desks & chairs)

_____ Tables and chairs

_____ Open space

_____ Other: _____

Equipment required: (please circle all that apply)

Please note that, unfortunately, YLC WILL NOT be able to provide any ELECTRONIC equipment (LCD project, laptop, tv/vcr). If you need these items, you must provide them yourself.

Easel/Flip Chart

White Paper

Lined Paper

Other (please list): _____

Thanks for your proposal!

Please return all proposals to us by September 30, 2008.

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