



2017 GFOASC FALL CONFERENCE

Sunday - Wednesday, October 1-4, 2017

The Marriott Grande Dunes, Myrtle Beach, SC

*“Creating Connections,
Building Bridges... Together”*

Speaker and Session Information

First Name: _____ MI: _____ Last Name: _____

Designation (CPA, CGFO, etc.) _____ Job Title: _____

Institution or Company: _____

Address: _____

City/State/Zip: _____

Phone: _____ Fax: _____

E-Mail: _____

Organization Website: _____

(The above is how your information will be shown in the program) _____

Please provide a brief bio about yourself to be used in your introduction

Session Title & Brief Description (include learning objectives and outcomes)

Audio/Visual needs (computer, sound etc.)

Your slot to speak will be based on the overall agenda. Please provide any restrictions on your availability to speak at the conference.

Email this completed form by August 10, 2017 (earlier is appreciated) to Donna Sullivan (dmsullivan@yahoo.com).

You will receive notification of your presentation date and time after receipt of this information.

Session code: _____ Presentation Date: _____ Presentation Time: _____