## IACT / IMDHA **Conference Event Proposal! НУР**NО-ЕХРО 2017 A Complementary Healthcare Extravaganza $MAY\ 19^{th}\ -21^{st}$

Last Name:	
Category:	
Date submitted: _ (office use only)	

Thank you for your consideration of being a presenting partner at our Annual Educational Conference. Here is the information we need which will help us, in collaboration with you, launch the most interesting and exciting Conference we have ever offered. If you would like us to consider more than one topic, workshop or course,

	and/or presentation category (electronic submission is a handout for the presentation. First time presenters must CD or DVD. Deadline for submissions is <b>August 31st</b>
Submissions missing the required mate PLEASE PRINT O 45 Minute Lecture 2 Hour W	esentation category. Check only one per submission!  rial above will be rejected without notice.  OR TYPE LEGIBLY!  Vorkshop Full Day/s Pre/Post Course  r form for each topic and length of presentation
Title & Description:	
In one sentence, which is the most important benefit the	attendees will gain from attending your program.
Other information about this topic we should know:	
Hypno-Expo is a collaborative effort, so we appreciate your a convenient ways for you to help as a marketing partner (pleas	
Provide a link or email address to our conference registration processed out postcard announcements to my mail list how many?  Send out Conference brochures to my mail list (how many?	)Provide an article for publication in our magazine
~ By submitting this proposal you agree to participate and	d accept any time or day the conference committee selects ~
Name:	
Address:	X7 1 11
	Web address:
Office Phone: Home Phone:	Mobile Phone:
I am a member of IACT	I am a member of IMDHA
I am a member of both IACT & IMDHA	I am <i>not</i> a member of either organization
	Conference Submission • 8852 SR 3001 • Laceyville, PA 18623 o@iact.org / info@imdha.com • Electronic Submission Preferred