

California Association of Healthcare Purchasing Materials Management

EDUCATIONAL PROGRAM SPEAKER CONTRACT

Speaker Name	Date
Professional Title	Company
Mailing Address:	City
E-mail Address:	State/Zip:
Contact Phone Number:	Fax Phone Number:

Title of Lecture
Brief Description of Lecture
Provide 3 objectives
Attach a curriculum vitae for each speaker

Please respond to each question	Comments
Will you provide handout materiel?	
What are your audio/visual needs?	

A copy of your presentation will be needed 3 weeks prior to the conference. If you would like CAHPMM to print your handouts we will need them 3 weeks in advance. Complete a form for each speaker. As a speaker you may attend all educational lectures, exhibits and will be entitled to program meals on the day that you speak.

Speaker's Signature / Date