**ATD TULSA 2020 PROGRAMS**

**WORKSHOP PROPOSAL INFORMATION SHEET**

**Speaker Information**

|  |  |
| --- | --- |
| **Primary Speaker Name** |  |
| **Secondary Speaker Name** |  |
| **Workshop Title** |  |

**Please complete the below based on the primary speaker.**

|  |  |
| --- | --- |
| **Phone** | **Primary#: Secondary#:** |
| **Email Address** |  |
| **Title** |  |
| **Company or Organization** |  |
| **Mailing Address** |  |
| **City, State, Zip** |  |

**Statement of Understanding**

By signing this proposal information sheet, I acknowledge that if my proposal is accepted by ATD Tulsa, I will provide conference speaking services *pro bono publico* in support of the goals and objectives of ATD Tulsa. I agree to indemnify and hold ATD Tulsa harmless from any liability. I agree to refrain from using any portion of my (our) workshop presentation as a platform to promote products or services, solicit funds or take political positions. I agree to convey my (our) remarks without bias toward race, gender, religion, political party, ethnicity or sexual orientation. I agree that submitting this proposal for conducting a workshop for ATD Tulsa indicates agreement to comply with the guidelines and expectations stated in the RFP.

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**Signature of Proposed Presenter Date**