



Illinois Society for Respiratory Care

Every Breath is Precious

ISRC 49th Annual Conference
Drury Lane Conference Center, Oak Brook Terrace IL
May 31 to June 2, 2017

Name _____ Telephone (Cell if available) _____

Address _____ City _____ State _____ Zip _____

Date and Time of Presentation: _____

Amount of Honorarium: **ISRC honorarium is \$250.00**

The ISRC will reimburse travel expenses at \$0.54/mile, **provide overnight accommodations at the ISRC headquarter hotel for those traveling 60 miles or more**, and \$30.00/day for expenses when necessary unless otherwise approved by the ISRC Program Committee. *(No expenses will be reimbursed without receipts.)*

Lodging needed for night(s) of _____

It is the responsibility of the speaker to call the conference hotel and reserve their room. Mention the "ISRC" to receive the conference discount rate. (One night per day of presentation is provided for speakers sponsored by the ISRC.)

Please see the most updated information regarding conference housing:

Your signature on this letter of agreement shall be enforced according to the laws of the State of Illinois.

Presenter's Signature _____ Print Name _____ Date _____

Tax ID or SSN _____ (required to supply you with tax form 1099)

Chair Person – **Audrea Hardwicks-Williams** - (773) 827-5855

Exhibits – **Larry Dastych** (630) 567-1057

Registration and Membership: **Douglas McQueary** (773) 962-4086



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Please check one

N/A, I do NOT have a sponsor- The ISRC is my sponsor

I DO have a sponsor

If you have an outside sponsor (ISRC NOT paying your honorarium, lodging or expenses.)

Name of the Sponsoring Agency _____

Representative Name for the Sponsoring Agency _____

Representative's Contact phone number _____-_____-_____

A presenter may have an interest in or affiliation with an organization which does not prevent him or her from making a presentation; however, the audience must be informed of this relationship before the presentation (in the introduction). Do you have significant financial (ownership) interest in a product you are discussing or an employment or research interest?

_____ No, I have no real or perceived conflict of interest relating to this presentation.

_____ Yes, I have the following interest(s):

Explain:

How will you keep the presentation free from bias (example: *disclaimer on slide*)

In support of our environment, the ISRC supports a more environmentally friendly means of transmitting media in lieu of duplicating handouts for our conference attendees

(Select all that applies)

_____ In lieu of print handouts, I give the ISRC permission to post my presentation on the ISRC web page for viewing by conference attendees

_____ In lieu of print handouts, I will provide my contact information (e-mail, etc) on the final slide of my presentation. This will allow conference attendees to contact me directly to obtain an electronic copy of my presentation

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_____ I do not want my presentation made available by any means other than when I have presented it for the agreed date and time of this conference

Title of lecture: _____

List 2 (two) Learning objectives:

1.

2.

Audio Visual Needs:

- _____ Computer with Microsoft Power Point
- _____ Support for Apple/Mac Computer (assuming that you bring your own MAC BOOK)
- _____ Internet Access
- _____ Sound/Audio Support for Presentation
- _____ Lapel Microphone
- _____ Laser Pointer

Signature: _____

[Electronic signature is acceptable.](#)

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