



SPEAKER'S RSVP FORM

Name: _____ Title: _____

Company: _____

Street: _____

City/State/Zip: _____

Phone: _____ Email: _____ Twitter handle: _____

Title of Talk/Speech: (if different than printed in the schedule)

ASTA will make your hotel reservations:

- Arrival date at hotel ____/____/____
- Departure date from hotel ____/____/____

Hotel Room Preference: King ____ Double ____ Other Special Requests: _____

Audio/Visual Requirements

- _____ LCD Projector
- _____ Other: _____

Please indicate if you have any special physical or dietary needs:

Reminder, also due by November 15th :

- Session description, abstract or manuscript
- Photo (digital photo file) of yourself
- Preliminary copy of slides, if possible
- Presentation release form

Reminder, due by November 28th :

- Copy of your presentation for show presentation

PLEASE RETURN THIS FORM BY NOVEMBER 15 TO:

Jennifer L. Crouse, American Seed Trade Association, jcrouse@betterseed.org
1701 Duke Street, Suite 275 Alexandria, VA 22314 Ph: 703-837-8140 Fax: 703-837-9365