



32nd Annual Blow Molding Conference and Exhibits

October 3-5, 2016

Crowne Plaza Atlanta Perimeter at Ravinia
4355 Ashford-Dunwoody Road, Atlanta, GA 30346

SPEAKER ACCEPTANCE & ABSTRACT FORM

Please sign and return this document which indicates your agreement to participate in ABC 2016 as a speaker. As a guest speaker, you will receive a complimentary registration, including the conference reception and meals, and a copy of the conference proceedings. You will be responsible for your personal expenses (i.e. hotel, travel, etc.). *If you are unable to attend the conference, you agree to make every reasonable effort to provide a replacement speaker.*

Speakers will provide a copy of their presentation by August 31, 2016, to include in the conference proceedings. It is understood that this version may differ from the one presented at the conference so as not to include proprietary information, etc.

Please return this form along with a brief biography to the Conference Coordinator as soon as possible so that we may include your participation in our conference promotions and marketing.

Title of Presentation: _____

3 points describing your presentation topic:

Describe your presentation topic in more details or email an abstract:

Please indicate your AV needs. If none are indicated, we'll assume none are needed:

Please complete the following (*as you would like it to appear in the proceedings and for event promotion*) :

Name: _____

Title: _____

Company Name: _____

Street Address: _____

City _____ State _____ Zip Code _____

Phone: _____ Cell Phone: _____

(*Cell phone number will be used for communication purposes only by Conference Coordinator and will not be published.*)

Fax: _____ Email: _____

Signature _____ Date _____

Please complete this form and email to
Deirdre Turner, Conference Coordinator at deirdre.turner@gmail.com
Please include a brief biography.