

Call for Speakers Information
LIA Foundation 4th Annual Lyme-Autism Connection
Conference
April 15 – 18th, 2010 – Indian Wells, CA

Conference Overview

This is the LIA Foundation's 4th annual conference focusing on treatments for families affected by autism, asperger's syndrome, Lyme disease and multiple-infections. Our growing community of physicians and parents are now looking for education on what treatments are working. Our conference melts together traditional and alternative treatments to educate attendees on what IS working and what ARE healing our families. We are also interested in the latest scientific breakthroughs on this area of medicine. Our speakers are generally passionate practitioners who are striving each day to find things to heal our families; this is the positive energy that makes this conference special.

We are estimating about 300-500 attendees and 40 vendors.

Dates and Location

Physicians Training	Thursday, April 15, 2010
General Session	Friday, April 16 – Sunday, April 18, 2010
Location	Hyatt Grand Champions Resort and Spa 44-600 Indian Wells Lane Indian Wells, CA 92210

Proposal Information

The following information must be provided by **September 30th**. You will be notified by e-mail if you are selected as a speaker prior to November 15, 2009. Please send all of the below items by e-mail to: tamiduncan@aol.com

1. Please fill out the speaker information sheet. (can fax or e-mail this form)
2. Topic title with a description of your presentation. Please make your description at least one paragraph.
3. CV or resume' of your experience
4. Short biography
5. Picture of yourself
6. Please state the learning objective of your presentation. **It should have at least 3 points that is the "take home" message that attendees will be able to benefit from.**
7. Financial and or conflict of interest information. Do you have any ties to companies in which you directly benefit?

Speaker Reimbursement

The following is our policy on speaker expenses. Please select from one of the following options on the speaker information sheet.

- **Gift in Kind Speaker** – this is a speaker who opts to pay for their own airfare and hotel room expenses and uses this as a donation to the LIA foundation to help assist in our mission of education. You would be responsible for booking your hotel accommodations. Your donation is very much appreciated and helps us free up funds to provide our programs to families.
- **General Speaker** – It is our general policy that for each speaker we will reimburse air fare (coach ticket) for the speaker. We request that tickets be purchased at the lowest available price. We will also provide hotel accommodations for two nights, the night before the speaker makes his/her presentation and the night of the presentation. Any additional nights, food and other transportation will be the speakers' sole expense.

Presentation Requirements

If you are chosen as a speaker, we will need your presentation in Power Point format only. It needs to be provided to us by **March 1, 2010**. To allow for a quality program for our attendees, we request that if any changes are made to your power-point, that you bring a disc or flash drive which will be given to our audio visual team to load prior to your presentation. We will not be changing the computer during the program. Your presentation needs to be **NO MORE THAN 60 MINUTES IN LENGTH**. If you need longer than 60 minutes you must specify and be prepared to shorten your presentation if need be. Please also be prepared to answer questions during the Q and A segment. You may also provide an article to be printed in our syllabus next to your power point handouts. An article is not required though. We also encourage you to stay for the entire conference if possible. In the past many of our speakers have regretted not staying for the entire conference as there is so much to be learned.

Our conference is looked upon as providing the most up to date cutting edge information for treating families affected by autism, asperger's syndrome, Lyme disease, etc. Please note that ONLY presentations with cutting edge information will be accepted. Thank you for your understanding on this.

Waiver and Authorization

By submitting a Call for Speakers, the speaker authorizes LIAF to record, duplicate and offer for sale on DVD, podcast, or any other mechanism that LIAF so chooses should the speaker be chosen to present at an LIAF conference. The speaker waives any and all claims resulting from the recording, duplicating and sales of the aforesaid. Speakers will receive a complimentary copy of their session's recording should they request it.

Speaker Information Form

Please submit your forms by e-mail or fax to the following...

LIA Foundation
1771 Honors Lane
Corona, CA 92883
Tami Duncan – tamiduncan@aol.com
Fax: (951) 817-1173
Phone: (951) 258-7398

Speaker Information Form

*Please submit this form with the information requested before
September 30, 2009.*

You may fax back to:

(951) 817-1173 or e-mail to: Tamiduncan@aol.com

Name _____

Address _____ City _____

State _____ Zip Code _____ E-mail _____

Phone Number _____ Fax Number _____

What is your specialty? _____

Topic Name and description

Please check the type of reimbursement you agree to:

Gift In Kind Speaker _____ **OR** General Speaker _____

Is your presentation geared towards: (please choose only one selection)

Physicians Training _____ General Session _____

Please sign that you have read the previous speaker information sheets and agree to the terms.

Signature _____

Date _____