

## ORAL PRESENTERS INFORMATION

Please complete and send this form **no later than August 5th, 2011**, by fax at (514) 395-1801 or by email at: [program@ecocity2011.com](mailto:program@ecocity2011.com).

### CONTACT INFORMATION:

Last name:	First name:
Phone :	Email:

### ABSTRACT INFORMATION:

Abstract Reference Number:
Title of Abstract:

### AUDIOVISUAL EQUIPMENT REQUIRED:

Each meeting room is equipped with all necessary audio and projection equipments (screen, data and video projector, computer with Powerpoint, lectern, microphones, etc.). **Please specify any other specific needs :**

<p><b>Software used:</b></p> <p><input type="checkbox"/> IBM Software used: _____</p> <p><input type="checkbox"/> MAC Software used: _____</p>
<p><b>Are you planning to have non-computer video presentations? If yes, in which format :</b></p> <p><input type="checkbox"/> VHS      <input type="checkbox"/> DVD</p> <p><input type="checkbox"/> Betacam</p> <p><input type="checkbox"/> NTSC (north American)</p> <p><input type="checkbox"/> PAL/SECAM</p>
<p><b>Will your electronic presentation need to be linked to Internet in the presentation room?</b></p> <p><input type="checkbox"/> NO    <input type="checkbox"/> YES</p>
<p><b>Will your electronic presentation need to be linked to the audio system in the presentation room?</b></p> <p><input type="checkbox"/> NO    <input type="checkbox"/> YES</p>



**AUTHORIZATION:**

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I authorize the audio and/or video recording of my presentation.

YES     NO

I give Ecocity 2011 the authorization to make available the presentation on the website of the Conference.

YES     NO

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

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