

Workshop Form (Required)

Gathering the following information is an important part of planning for the upcoming conference/training – it will ensure that the organizing goes as smoothly as possible. Thank you in advance for the hard work that you have put into organizing the training! **Please complete the following form and fax (858-454-8598) or email (info@stephaniecovington.com) back at least six weeks in advance to your event.** If you have any questions please feel free to call for further information – 858-454-8528.

If any of the questions below do not apply to your particular event please write “NA”.

1. General Information

- Date(s) of conference/training event: _____
- Name of Event: _____
- Location of Event (*include full address*): _____

- How many participants do you expect to attend this event? _____
- Primarily from (*check all that apply*): Mental Health Substance Abuse Criminal Justice
- Is your training open to the public, if they want to register? Yes No

If yes, I'll list it on my website on the Speaking Schedule. Please provide the following:

Name of Contact Person to Register for this event: _____

Contact Phone: _____ Contact Email: _____

Website: _____

Fee to Attend: \$ _____ Will CEUs be available? Yes No

Please email your standard registration brochure to info@stephaniecovington.com

2. Dr. Covington's Participation at the Event

- Please provide the following information regarding the Keynote/Plenary:
 - a. Date and Start/End Time: _____
 - b. Name of the Keynote/Plenary: _____
 - c. Location (*building, room #, etc.*): _____
 - d. Expected number of participants: _____

Please provide the following information regarding the Workshop (if there is more than one Workshop at this event, please provide below information for both):

e. Date and Start/End Time: _____

f. Name of the workshop: _____

g. Location (*building, room #, etc.*): _____

h. Expected number of participants: _____

- Who is primary contact for Dr. Covington to coordinate with for this event?

Name: _____

Contact Phone: _____ Contact Email: _____

- Please be sure the following AV equipment will be available (as per earlier conversation):
 1. LCD Projector and screen
 2. Laptop with PowerPoint pre-loaded
 3. Table (not podium) for laptop, water, and Dr. Covington's papers
 4. Flip chart with markers
 5. Lavalier wireless microphone

- We typically email over the following items prior to the event:
 - PowerPoint presentation in .ppt format to be loaded onto the laptop used at the event
 - Adobe PDF file which contains printable PowerPoint slides/notes area that you will need to provide as handouts to attendees of this event

What is your deadline date to receive this information? _____

Who should we email it to? Name: _____

Email address: _____

- Please check any of the following items you wish us to provide you with (*check all that apply, these items are typically used in your promotional materials*):

Bio Headshot CV Presentation/Workshop description & objectives

You may also access Stephanie Covington's CV and Bio at www.stephaniecovington.com

You may also access Center for Gender and Justice Bio and activities at www.centerforgenderjustice.org

- We will need a Letter of Agreement on your letterhead stating the date(s) and time(s) of your event, the agreed upon honorarium fee as well as any other relevant information. Please mail to our La Jolla, CA office.

3. Travel Arrangements

- Please provide information on Dr. Covington's hotel stay:

Hotel Name: _____

Address: _____

Phone/Fax Number: _____

- Do you plan to make Dr. Covington's reservation for the hotel? Yes (*see below*) No

If yes:

Confirmation Number of Reservation: _____

Dates: _____

Is the hotel prepaid by you? Yes No (*If no, Dr. Covington will use her credit card and submit a copy of the receipt for reimbursement*)

- Should we book Dr. Covington's own air travel, using our own travel agent (that is our preference and Dr. Covington books at the lowest coach rate)? Yes No

If yes, do you need us to make reservations by a certain date? _____

If no, please specify how you would like to arrange air travel booking: _____

- Will you be arranging airport or hotel pickup (e.g., if you are planning to pick Dr. Covington up from hotel to take her to the training, or from the airport to the hotel) Yes (*see below*) No

If yes, please list the time and include the cell # and name of the person driving, vehicle color, etc.:

- Driving directions (if any driving is involved) please have them faxed to us at fax # 858-454-8598 or emailed to Dr. Covington at info@stephaniecovington.com, at least 1 month prior to the training. If there is travel both to the hotel and to the training site, please include both. (If you download directions from Map Quest please be sure to check the directions for the last mile – our experience is that they are often not accurate).

4. Confirmation of Honorarium and Reimbursement

- The honorarium for this event will be: \$ _____ (*payable in US Funds*)
- Travel arrangements (hotel, airfare, taxi's, meals, etc.) will be submitted for reimbursement, except where noted above which are prepaid by you. Do you require original receipts? Yes No

Do you use a per diem rate instead of actual cost amount? Yes (*see below*) No

If yes,

a. What is the per diem rate per day? \$ _____

b. What is included in the per diem rate (e.g. meals only)? _____

- Please provide the full address and contact name where the final invoice should be submitted:

- Please add any additional instructions regarding reimbursement, if needed:

5. Books on Site

Participants often appreciate the opportunity to purchase materials while at the training. There are several ways to do this. Please select which option(s) you would like us to send additional information on (*check any that you may be interested in, we will confirm prior to proceeding*):

- Books for Sale Through Bookstore:** You can arrange to have a local bookseller come to the training to sell materials. If you choose to do this please list the physical address, email address and phone number of the bookstore that you have chosen below:

Name & Address: _____

Phone: _____ Email Address: _____

- Books for Sale on Site Through Conference Coordinators:** We can arrange to have a selection of books shipped to you to be made available for sale during the event. This would require you to have a staff member or volunteer available to sell the books at a table/booth during the event as Dr. Covington would not be able to do so. As we would pre-pay for the books, any sales made during the event would be payable to Dr. Stephanie Covington. At the end of the event you would provide us with payment for the books sold (ie: checks/cash collected) as well as be responsible for shipping any un-sold books back to our office in La Jolla, CA. Any un-sold and non-returned books would be billed to you. We would need one month's notice prior to the event in order to ship the books to your specified location prior to the event.

- Brochures for Distribution on Site (and sample books):** We can provide book brochures to be made available to attendees at your event. Any attendees interested in the full book selection, pricing and/or ordering information can be found in the brochure. Attendees may also view sample copies of Dr. Covington's books at your request. If you request book samples in addition to the brochures, this would require you to have a staff member or volunteer available for a limited time at a table/booth during the event as well as the ability to ship the samples back to our office at the end of the event.

6. Additional Information

Please provide any additional information regarding your event that has not been addressed above.
