

# Massage & Myotherapy Australia 2020 National Conference

## Presenter Abstract - Application Form

First Name:		Family Name:	
Address:			Postcode:
Mobile:		Email:	
Academic Qualifications (Abbreviation): <i>(30-50 word biography that can be used in marketing brochure)</i>			
Presentation History <i>(include event information and contact details):</i>			
Event	Presentation	Contact & Email	

### SESSION DETAILS

Session Title:			
Session Type:	<input type="checkbox"/> Key Note	<input type="checkbox"/> 45 Minute Presentation	<input type="checkbox"/> 90 Minute Technical Presentation
	<input type="checkbox"/> Hands-On Workshop	<input type="checkbox"/> Pre-Conference - Friday, 22 May 2020	
	<input type="checkbox"/> Plenary		
Description: <i>(50 - 120 Words)</i>			
Equipment Needed:			

I have read and understood the above statement and agree to abide by the conditions under which my presentation/lecture is submitted.

Name: \_\_\_\_\_

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

Date \_\_\_\_/\_\_\_\_/\_\_\_\_

#### PLEASE NOTE

While presenters may be from commercial organisations, presentations should be non-commercial in nature. Organisations seeking to promote their commercial interests should do so by exhibiting and/or sponsoring the conference.