



**Texas
Foster
Family
Association**
www.tffa.org

CALL FOR PRESENTERS

37th ANNUAL CONFERENCE
OMNI AUSTIN HOTEL AT SOUTH PARK
AUSTIN, TEXAS
OCTOBER 7 - 9, 2010

The TFFA Education and Training committee is seeking presenters for its upcoming conference on October 7, 8, and 9, 2010. This conference is sponsored by several child placing agencies both public and private. The target audience is comprised of foster and adoptive parents, child placing staff from CPS, private child placing agencies and other child advocates. We anticipate over 600 participants.

The conference is comprised of different presentation lengths and times (**subject to change**); they are:

- Day One:** 9:00 am to 5:00 pm - (with a lunch break) Intensive
6:30 pm to 9:30 pm - Mini-Intensive
- Day Two:** 8:30 am to 10:00 am - Opening Session/Keynote
10:15 am to 12:00 pm
1:30 pm to 3:00 pm
3:15 pm to 5:00 pm
- Day Three:** 8:00 am to 9:00 am - Regional Forums
9:15 am to 10:45 am
11:00 am to 12:30 pm
1:45 pm to 3:30 pm
3:45 pm to 4:30 pm - Closing Session

We offer a variety of topics that are relevant to the care and treatment of children, youth in foster care and those who have been adopted. We also offer topics that help the child care providers, staff and others who work with the children in care to cope with stress and behaviors. The "how to" is a very important part of the topics and we ask that it is provided along with the "what". Handouts are extremely important and are used by many as a guide and refresher to what was presented so please prepare and provide handouts with your presentation.

The opportunity to be an Exhibitor is also available. We have CPA's, agencies and companies that provide services to our children, vendors (books, T-shirts, toys, Jewelry), etc. If you are interested in having a booth as part of your speaker reimbursement, please indicate this on the form. If you do not want to present but would like a booth please contact me for further information on being a vendor or exhibitor.

If you are interested in being a presenter at this conference please complete the Speaker Information form.

Please provide a complete list of topics you present and a description of each of the topics. The committee will select the topics we are interested in from your list. Please feel free to include any additional pages or attachments you have. **Please also provide the approximate amount for expenses, especially for travel and fees so that we may consider this in our budgeting for speaker costs.**

You may provide your information either by mail, fax, or email. You will be contacted if you are selected as a Presenter. Thank you for your time and we look forward to working with you.

Please feel free to pass this information on to your colleagues and associates who might also be interested in presenting.



Marlene Steiner

Education and Training Chair, TFFA

P.O. Box 720695 • McAllen, Texas 78504

Phone / Fax: (956) 928-0122 • Cell: (956) 624-7612

E-mail: sparlene@juno.com



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CONFERENCE SPEAKER INFORMATION

October 7, 8 and 9, 2010
Omni Austin Hotel at South Park
4140 Governors Row, Austin, TX 78744
Ph: 512 448-2222
Fax: 512 442-8028

Name and Credentials: (as you want it to appear in the conference program)

Social Security Number or I.D.#: _____

Mailing Address:

Street: _____

City: _____

State: _____ Zip Code: _____

E-Mail: _____

Phone:

Work: _____

Cell: _____

Home: _____

Name of workshop/s:

Length of Presentation:

6 ½ Hr. Intensive _____ 3 Hr. Training _____ 1 ½ Hr. Training _____

TFFA SPEAKER AGREEMENT

Provide a brief summary of your presentation: **(as you want it to be printed in the program. Attach a separate sheet, if necessary.)**

HANDOUTS ARE EXTREMELY IMPORTANT TO OUR ATTENDEES:

Will you be providing handouts? _____ YES _____ NO
(copies will be the responsibility of the speaker)

PLEASE, CHECK THE AUDIO/VISUAL EQUIPMENT YOU NEED TO EFFECTIVELY PRESENT YOUR WORKSHOP: **(Please, inform us if you will be providing any of your own equipment)**

_____ TV/VCR _____ Slide Projector _____ Microphone _____ Overhead Screen
_____ Podium _____ White Board w/ Markers _____ Display Table _____ LCD Projector
_____ Other (Please list) _____

ESTIMATED COST OF WORKSHOP:

FEE \$ _____ Agreed amount to be paid after the conference and mailed to you.

HONORARIUM \$ _____

TRAVEL \$ _____ (Mileage reimbursed @ Texas state rate, air travel must be the lowest rate and made 30 days in advance of conference, receipt required.)

MEALS \$ _____ (\$36.00 per day-receipts required.)

HOTEL \$ _____ (Please make your reservations for the nights agreed on and forward me your confirmation number as soon as possible. Make your reservation now as rooms go quickly.)

**REMINDER:
YOU MUST PROVIDE ALL RECEIPTS AND TAX ID OR SOCIAL SECURITY NUMBER
AT TIME OF SUBMISSION FOR REIMBURSEMENT!**

(Please, let me know the date and time of your arrival)

ROOM RESERVATIONS MUST BE MADE WITH:

OMNI AUSTIN HOTEL
4140 Governors Row, Austin, TX 78744
Ph: 512 448-2222
Fax: 512 442-8028

TFFA SPEAKER AGREEMENT

EXHIBITS:

Do you desire an exhibit table in the conference vendor area? _____YES _____NO

(If you desire an exhibit table the information will be forwarded to the conference exhibit coordinator and she will contact you to complete the arrangements.)

PLEASE, ATTACH THE FOLLOWING C.E.U. INFORMATION:

- Workshop Content
- Learning Objectives
- Format (role play, lecture, panel, etc.)
- Resume or Biographical Information

YOUR CONFERENCE WORKSHOP IS SCHEDULED FOR:

_____ Thursday	October 7, 2010	Intensive	9:00 am - 5:00 pm
_____ Thursday	October 7, 2010	Mini-Intensive	6:30 pm - 9:30 pm
_____ Friday	October 8, 2010	Opening / Keynote	8:30 am - 10:00 am
_____ Friday	October 8, 2010	Session 1	10:15 am - 12:00 pm
_____ Friday	October 8, 2010	Session 2	1:30 pm - 3:00 pm
_____ Friday	October 8, 2010	Session 3	3:15 pm - 5:00 pm
_____ Saturday	October 9, 2010	Session 4	9:15 am - 10:45 am
_____ Saturday	October 9, 2010	Session 5	11:00 am - 12:30 pm
_____ Saturday	October 9, 2010	Session 6	1:45 pm - 3:30 pm
_____ Saturday	October 9, 2010	Closing	3:45 pm - 4:30 pm

PLEASE, RETURN SIGNED AGREEMENT AND REQUESTED INFORMATION TO:

MARLENE STEINER
P.O. Box 720695
McAllen, Texas 78504

Home: 956 928-0122

Cell: 956 624-7612

Fax: 956 928-0122

E-Mail: sparlene@juno.com

Date

Date

Presenter's Signature

Marlene Steiner
TFFA Education Chair