



NATIONAL ASSOCIATION OF TRIBAL HISTORIC PRESERVATION OFFICERS  
P.O. Box 19189 • Washington, D.C. 20036-9189 • Phone: (202) 628-8476 • Fax: (202) 628-2241 • [www.nathpo.org](http://www.nathpo.org)

20<sup>TH</sup> NATIONAL TRIBAL PRESERVATION CONFERENCE  
September 10-14, 2018 Suquamish Clearwater Casino Resort, Washington

## PRESENTER PROPOSAL FORM

Please return at your earliest convenience and no later than August 17, 2018.

NATHPO encourages you to share your knowledge and experiences in tribal cultural preservation. Sharing your experiences is a great way to reach others who work in similar topics, get feedback, and receive encouragement to continue your work.

### **Title and Description of Your Session:**

The title and description should accurately reflect the content, activities, and anticipated outcomes of your session. Please be specific. We reserve the right to edit titles and descriptions for use in the conference materials. Attach a separate piece of paper if necessary.

Proposed Title: \_\_\_\_\_

Description (including presenters):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### **Coordinator and/or Primary Contact:**

Name & title: \_\_\_\_\_

Tribe/Organization: \_\_\_\_\_

City & State: \_\_\_\_\_

Phone: \_\_\_\_\_ Email address: \_\_\_\_\_

**Subject Area (check all that apply):**

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Legal, Compliance           | <input type="checkbox"/> Contemporary Issue     | <input type="checkbox"/> NAGPRA             |
| <input type="checkbox"/> Unique Tribal Issue         | <input type="checkbox"/> THPO                   | <input type="checkbox"/> Regulatory         |
| <input type="checkbox"/> Technical Assistance        | <input type="checkbox"/> Federal or State Issue | <input type="checkbox"/> Museum/Cult Center |
| <input type="checkbox"/> Other (subject area): _____ |   |   |

**Audiovisual Equipment:**

Please check the equipment you will need for your presentation.

- Flipchart and markers (if yes, how many: \_\_\_\_\_)
- Microphone/s (if yes, how many: \_\_\_\_\_)
- TV, video player, CD player, sound speakers (select which one/s)
- Power point projector
- Screen

**Computer (we urge you to use a “jump drive”)**

Will you need a computer?

- Yes
- No

**Preferred Meeting Room Set Up:**

- Speaker’s podium only
- Head table and number of chairs: \_\_\_\_\_
- Standing microphone in audience
- Handheld microphone for audience

**Attendance:**

What is the ideal number of participants for your session? \_\_\_\_\_

Please attach additional pages, if needed.

We appreciate your interest in presenting information at the 20<sup>th</sup> National Tribal Preservation Conference. Please understand that we cannot guarantee that you or your organization will be chosen as a presenter. Presenters will be selected dependent upon time constraints, meeting theme, and material content.

**Please return completed form via email or mail to (no fax):**

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Washington, DC 20036-9189

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