



AMERICAN AGENTS ALLIANCE  
**CONFERENCE  
& EXPO | 2019**

**CALL FOR PRESENTATIONS SUBMISSIONS FORM**

JW Marriott Desert Springs Resort & Spa  
September 26-29 | Palm Desert, CA

**Workshop Title** (8 words or less): \_\_\_\_\_

**CE Title** (8 words or less): \_\_\_\_\_

**Session Description:** A description of workshop or CE class (50 words or less).

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**Learning Objectives:** Please list 3 learning objectives with a brief explanation/detail.

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**Learning Level:** Who is this geared toward (industry level experience)?

- 0-2 years       3-5 years       6+ years

Is this class currently CE approved?  Y  N If not, have you filed for CE approval?  Y  N

**Length of proposed workshop or CE class:** \_\_\_\_\_

**Presenter's Name & Title:** \_\_\_\_\_

**Presenter's Company:** \_\_\_\_\_

**Presenter's Email:** \_\_\_\_\_ **Presenter's Phone Number:** \_\_\_\_\_

**Presenter's Bio** (150 words or less):

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**Strand Preference for Topic (select all that apply)**

- New Agents (0-2 years)     Personal Lines     Agency Management/Operations  
 Sales/Marketing     Commercial Lines     Life/Health     Technology

**Workshop Format:**

- Lecture     Panel Discussion     Clinic (Clinics should be no longer than 25 minutes.)

**Workshop/CE Proposal Submitted By:**

**Name & Title:** \_\_\_\_\_

**Company:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Fax:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Please submit completed form to Stacy Lowrance.**

**Fax:** (916) 682-7463

**Email:** stacylow@comcast.net

**Mail:** American Agents Alliance

1231 I Street, Suite 201, Sacramento, CA 95814

**Submittal Deadline: April 1, 2019**