



SPEAKER & ABSTRACT FORM

Speaker details

Name: _____ Professional title: _____
Company name: _____ Phone: _____
Email: _____ Website URL: _____

Speaker's social media links

Facebook (URL): _____ X (@): _____
LinkedIn (URL): _____ Other: _____
Other: _____

Speaking role: Panelist Speaker Moderator Other:

Title of talk:

Abstract of talk:

Speaker's bio:

Notes or special needs:

Please return the completed form to info@gogeomatics.ca with your logo and headshot

SUMSF reserves the right to modify the speaking schedule.