



# North American Society for Pediatric and Adolescent Gynecology

## 2010 Annual Meeting

The Westin Casuarina Hotel  
Las Vegas, Nevada  
April 15-17, 2010

### LUNCHEON AND WORKSHOP SUBMISSION FORM *Due May 18, 2009*

Please complete this *Workshop and Luncheon Submission Form*. Your submission will be presented to the program committee for consideration for the 2010 Annual Clinical Meeting. Due to the volume of proposals, unfortunately not all submissions will be able to be accepted.

#### Workshops and Luncheons

- Workshop presentations are 1 ½ hours in duration and may have as many as 70 participants. Please indicate if you need to limit your session to a certain number of participants.
- Workshops presenters will be asked to submit their power point presentations for scientific review and for inclusion on a CD to be distributed to meeting participants by January 31, 2010.
- Workshop presenters if using a powerpoint presentation will be asked to bring their own laptop computer (and if using Apple hardware, your AV adaptor)
- Luncheon presentations are 1 ½ hour in duration and are formatted as a round table discussion, with up to 10 participants per table.
- Luncheon leaders can choose the format of their round table luncheon. Handouts however are appreciated by the participants. If the format chosen includes an AV presentation, the luncheon leader must bring their own laptop computer.
- Workshops and Luncheons must be presented by those people identified on this form as the “leaders.” Should the workshop or luncheon proposal be accepted, any additional presenters not noted on the original submission form should be identified to the NASPAG planning committee.
- NASPAG is a small organization of dedicated colleagues and we regret that we are unable to offer any honoraria or travel/hotel/registration compensation to workshop and luncheon presenters.

The *Workshop and Luncheon Submission Form* must include the following information:

- Your full name, degrees/licensures/certifications, professional title, institution, address, telephone, FAX, and e-mail address.
- A description of the workshop/luncheon to allow the program committee to understand the content, objectives and format. The written description MUST include all of the following:
  - (i) a catchy title
  - (ii) the overall purpose of your workshop or luncheon
  - (iii) learning objectives (what will the participant learn?)
  - (iv) content areas
  - (v) target audience
  - (vi) type of activity provided (i.e., interactive, didactic, case presentations/discussions, Q&A, panel discussion, etc.).
  - (vii) expected results of this educational activity

Return proposal and form to the attention of Cassandra Larkins in the NASPAG office by **May 18, 2009**. Send to [clarkins@acog.org](mailto:clarkins@acog.org) or mail to the North American Society for Pediatric and Adolescent Gynecology 409 12<sup>th</sup> Street, SW. Washington, DC 20024

**NORTH AMERICAN SOCIETY FOR PEDIATRIC AND ADOLESCENT GYNECOLOGY  
2010 WORKSHOP and LUNCHEON SUBMISSION FORM**

Submitter/Leader (will receive all correspondence and be responsible for communicating with co-presenters):

**Name** \_\_\_\_\_

**Degree/Licensure/Certification** \_\_\_\_\_

**Title** \_\_\_\_\_

**Institution** \_\_\_\_\_

**Address** \_\_\_\_\_

\_\_\_\_\_

**Phone** \_\_\_\_\_ **Fax** \_\_\_\_\_

**E-Mail Address** \_\_\_\_\_

**NASPAG member:** \_\_\_\_\_yes \_\_\_\_\_no

**Title** \_\_\_\_\_

**Proposed as a** (check whichever is applicable):

**Workshop** \_\_\_\_\_ **Luncheon** \_\_\_\_\_

**Capacity** \_\_\_\_ Unlimited (up to 70 for workshop; 10 for luncheon) or Limited to \_\_\_\_\_

**Learning Objectives** (please be brief and limit number to no more than three (3) learning objectives):

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

**Description** (please be as succinct as possible. Include how the session will be organized, learning format, target audience, etc.):