

WORKSHOP FORM

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The Association of American Geographers
2007 Annual Meeting
April 17-21 2007
Hilton San Francisco
San Francisco, California

COMPLETE FORM MUST BE SUBMITTED BY OCTOBER 1 2006.

Incomplete forms will be returned.

WORKSHOP TITLE (as it will appear in all official publications): _____

DESCRIPTION of WORKSHOP: Please provide a description (100 words or fewer) of the workshop content and objectives. Preferred method of submission is via e-mail to sheristach@conferencemanagers.com. Description will be used for all official publications (may be edited for space and content).

ORGANIZER(S):

1. Name: _____
Organization: _____
Address: _____

Phone _____
Fax _____
E-mail _____

2. Name: _____
Organization: _____
Address: _____

Phone _____
Fax _____
E-mail _____

INSTRUCTOR(S) if different from Organizer(s):

1. Name: _____
Organization: _____
Phone _____
E-mail _____

2. Name: _____
Organization: _____
Phone _____
E-mail _____

TIME:

Indicate the amount of time needed for workshop, and preferred hours. Actual time and location of the workshop will be determined by space, time and equipment needs. **For full-day workshops, factor in one hour for lunch.**

Hours required (inclusive of 1 hour for lunch): _____
Preferred hours (e.g. 8am - 4pm): _____
Preferred date: _____

CAPACITY:

Maximum number of attendees : _____

NOTE:

AAG reserves the right to cancel a workshop if the workshop would result in a substantial financial loss to the AAG.

SUBMISSION METHODS:

FAX: 703-964-1246

MAIL: AAG 2007 Conference, 11260 Roger Bacon Drive, Suite 402, Reston, VA 20190

E-MAIL: sheristachowski@conferencemanagers.com

Questions? Call 703-964-1240 ext. 23

SUBMISSION DEADLINE: OCTOBER 1 2006

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WORKSHOP BUDGET WORKSHEET

Please be as thorough as possible. AAG is unable to reimburse for expenses not estimated and submitted in advance.

Name of Workshop: _____

Maximum number of attendees (from page 1) _____

PER-PERSON COSTS

Handouts _____
Computer Software _____
Computer Hardware _____
Coffee and Tea (est. \$9 per person) _____
Pastries/Cookies (est. \$9 per person) _____
Soft Drinks (est. \$9 per person) _____
Lunch (if included - est \$40 per person) _____
Other _____
Total per-person cost _____

FIXED COSTS

Overhead Projector (est. \$50 each) _____
35 mm Slide Projector (est. \$50 each) _____
Screen (est. \$35 each) _____
LCD Projector (est. \$250 each) _____
VCR and Monitor (est. \$200) _____
Supplies _____
Photocopying _____
Transportation _____
Other (specify) _____
Total Fixed Costs _____

To be completed by AAG: FINAL PER-PERSON FEE: \$ _____

The AAG reserves the right to revise and make final determination on all expenses, budgets and fees