



Webinar Presenter/Speaker Agreement Form

Please complete this form and return to Shannon, smccracken@tnpa.org.

General Information

Name: _____ Title: _____

Organization/Company: _____

Address: _____

Phone _____ Cell: _____ Email: _____

If others are presenting with you, please provide their information

1. Name: _____ Title: _____

Organization/Company: _____

Phone _____ Cell: _____ Email: _____

2. Name: _____ Title: _____

Organization/Company: _____

Phone _____ Cell: _____ Email: _____

If you have a graphic that you would like us to use to promote the webinar, please send it along with this form.

Headshots are encouraged but not required.

Additional questions on reverse side



Webinar Information

Topic: _____ Date & Time: _____

Title: _____

Brief Description, to be used in marketing:

Highlights or Objectives:

- 1. _____
- 2. _____
- 3. _____

Intended audience (check all that apply):

- 1. Junior Midlevel Senior
- 2. Nonprofits Commercial Partners
- 3. Particular roles (e.g., HR, CFO, donor services): _____

Confirm that TNPA has permission to share a recording of the webinar and/or the presentation deck with registered attendees after the webinar:

Yes (default) No

Speaker Signature: _____ Date: _____

TNPA will make the attendee list available to the presenter(s) after the webinar, including name, title, and organization/company (if collected). List will not include contact information.