



Proposal to Host 2018 or 2019 Conference

INSTITUTION NAME: _____

LOCAL HOST: _____

MAIN CONTACT NAME: _____

CONTACT ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP:** _____

PHONE: _____ **EMAIL:** _____
Work Cell

TWO-DAY PROPOSED TIME FRAME: _____ *Month* _____ *Day One* **and** _____ *Day Two* _____ *Year*

VENUE:

Where is the location of the facility that you propose to have the conference sessions?

Is there sufficient parking located in close proximity? Yes No

If no, please explain:

Is there a charge for AV and other basic equipment? Yes No

Where is the location that you propose to host the Special Event and what is the activity?

Is there a cost to use these facilities? Yes No

If yes, please explain:

AMENITITES:

Name of the hotel and address that you propose to use for lodging?

Is the hotel in close proximity of the proposed meeting facility? Yes No

How many miles away from the meeting facility is the hotel and what accommodations would be made for traveling to the meetings, hotel and special event?

Suggested Food for Breakfast, Snacks, Luncheon (please give detail of the type of food and drink and proposed location for luncheon and catering)

Additional Comments and/or Explanations:

ESTIMATED COST (based on 60 - 80 attendees):

Lodging/Parking Cost: _____

Costs for Meeting Rooms: _____

AV and/or Equipment Charges: _____

Food Costs for Attendees: _____

Printing, Postage, Miscellaneous Costs: _____

TOTAL ESTIMATED COST:

NOTE: Please attach any sample menus, estimates of cost, facility flyers, etc.

Conference Theme Suggestions:

Return completed form to Kelly Birchfield via fax at 334-293-4559 or click [here](#) to submit. Contact

Kelly Birchfield (kelly.birchfield@accs.edu or 334-293-4572) for Conference questions or visit our website at <http://alair.org/>