

## Speaker Acceptance Form

Dear Drs. Rivers and Taylor:

I am pleased to accept your invitation to participate in the *2018 Daniel S. Blumenthal Public Health Summit*.  
As your invitation requests, I will participate in the following activity:

Title of Your Presentation:

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Please confirm your contact information and provide email or other information, if missing.

Name:

As you want it to appear in the program

Organization:

Address:

City, State ZIP Email:

PH:

FAX:

Assistant's Name and Contact:

**Audio Visual:** We will provide LCD projector and laptop       I DO NOT require A/V

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Print Name and Sign

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Date

Thank you for the invitation; however, I am unable to fulfill this speaking engagement