



Skybox Exhibitor Presentation Form

December 6 & 7, 2010

We are pleased to offer you the opportunity to showcase your company products by purchasing a one hour presentation in a skybox room.

Please complete this form and return it with payment by October 29, 2010 to:

RSAC
300 Heart Blvd. Loves Park, IL 62526
PH: 815-921-8474 Fax: 815-636-3069
Email: bjaquet@kidsroe.org

**One - one hour presentation \$ 50
of presentations you wish to purchase for \$50 each X _____
Please make checks payable to, "RSAC Conference" \$ _____

Presenter Information Please print or type:

Last name _____ First name _____

Co-Presenter(s), if applicable _____

Company Name _____

Address _____ City _____ State _____ Zip _____

Email _____

Session Title (5 words or less) _____

Session Description: Please include how your session impacts raising student achievement and is scientifically researched-based.

Check Appropriate Grade Levels:

___ All levels ___ Early Childhood ___ Primary ___ Intermediate ___ Middle School ___ High School

Check Appropriate Target Audience:

___ All Positions ___ Administrators ___ Teachers ___ Spec. Ed. ___ Technology

Check Appropriate Strand:

___ Content/Instruction ___ Special Education/Subgroup Populations ___ Data/Assessment ___ Family/Community/School Climate

Presentation Style: (Please use percentages) _____ % Interactive _____ % Lecture

Skybox Description:

Skybox presentation rooms overlook the exhibit hall. Room set-up will be classroom style (15-20). Room includes tables, chairs and electrical outlet with surge strip. **No AV equipment will be provided unless purchased from Pheasant Run directly or brought by your company.** A "Master Order Form" from Pheasant Run will be sent with your skybox confirmation letter.

For questions call Donnette @ 815-921-8467 or Barb @ 815-921-8468