

2011 NIRSA Region IV Student Lead On Host Application



Please fill out completely and return no later than March 1, 2010

Host Institution: _____ **Host City:** _____
Contact Person: _____ **Phone:** _____
Email: _____
Address: _____

Rationale for Hosting Conference: _____

Conference Information

Registration Cost: _____ Potential Theme: _____

Dates and Times: _____

Meeting Locations: _____

Presentation Topics: _____

Specialty Workshops: _____

Conference Activities: _____

Location Attractions: _____

Proposed Hotel Information

Property: _____ Dates: _____

Room Rates: _____ Number of Rooms: _____

Accessibility to Conference: _____

Transportation

City Accessibility: _____

Parking Availability/Cost: _____

Other: _____

Attendance, Budget, & Support

Attendance: _____

Meals: _____

Promotional Materials: _____

Potential Sponsors: _____

Intangibles: _____

Submitted by: _____ Date: _____

Please return to:
Jayson Anderson
andersonja1@sfasu.edu Fax: (936) 468 - 7052