



Speaker Information Form

14th International Symposium on Milk Genomics & Human Health

Hôtel Le Bonne Entente, 3400 Chemin Sainte-Foy, Québec City, Canada

September 26 - 28, 2017

Please complete as requested and **return by Aug. 21, 2017 to: imgcinfo@gmail.com.**

Presentation Information:

Title of Presentation: _____

Speaker's Name: _____

Title: _____

Organization: _____

Address: _____

Phone: _____ E-mail: _____

Hotel Stay Dates:

The Symposium Coordinator will reserve your room at Hôtel Le Bonne Entente, Québec City, Canada, based on your requested stay dates. Please notify the Coordinator if you choose to stay elsewhere or request a room outside of the block accommodations; the Coordinator will contact you with additional instructions.

Arrival date: _____

Departure date: _____

Please attach to be used in the symposium program materials:

Your biography (up to 75 words)

A high-resolution photo (300 dpi/ppi)

Do you need special AV equipment?: _____

Additional needs or comments: _____