



Application form for an ISPRS Member to request a speaker in the ISPRS Keynote Speaker Programme

ISPRS OdM/AsM/RgM (referred to as "ISPRS Member") name:

Contact person of the ISPRS Member:

Event name for which a keynote speaker is requested:

Venue of the event:

Date of the event:

Web site of the event:

Contact person of the event – name, e-mail address, telephone:

Name:
E-mail:
Phone:

Number of expected participants:

Keynote speaker's name, affiliation, e-mail address:

Name:
Affiliation:
E-mail:

Hereby, I confirm that the local organiser will waive the registration fee, cover full board and accommodation for maximum 3 nights for the keynote speaker.

Date of the submission: _____

Signature of the ISPRS Member Contact Person: _____