

**SAMPLE -MULTI PRESENTATION SUBMISSION FORM**

**Deadline for most submissions: 31 December 2022**

**Due date for research poster submissions: 1 March 2023**

**Presenters must register by 15 March 2023**

**(or within one week of acceptance if later)**

**CONTACT INFORMATION.**

Definition: The “Lead Presenter” is the person who will be attending the conference who is responsible for the presentation. They are responsible for collecting all information from and communicating all information to any others involved. We understand that, as the Lead Presenter, you may be a moderator or otherwise not necessarily the primary presenter. Presenter listings and all other presenter details will be collected in subsequent fields.

The Lead Presenter and anyone assisting that person will be contacted for all communications for this presentation.

**Are you preparing this form for someone other than yourself?** \* Yes / No

**If Yes, then enter your email address here.** **Please indicate assister’s name, phone number and role in the comments box at the end of this form.**

**Assister’s Email Address.** 

**Please re-enter Email Address.** 

**LEAD PRESENTER’S CONTACT INFORMATION:**

**Lead Presenter’s First Name and/or initials.** \*

**Lead Presenter’s Last Name.** \*

**Lead Presenter’s Email Address. \***

**Please re-enter Email Address.** **\***

**Lead Presenter’s Phone Number.** Include country code if outside the U.S. \*

**If you have not received an automated confirmation of receipt of this form within 24 hours, or a confirmation of acceptance status by 1 March 2023, please let us know by sending an email to program@asdreams.org**

**NATURE OF SUBMISSION****. \***

|  |
| --- |
|  New for 2023 (initial submission) |
|  Modification (replacing an earlier 2023 submission) |

**SINGLE, MULTI OR POSTER PRESENTATION.**

**SINGLE PRESENTATION -** Talk, Workshop, Morning Dream Group, Special Event. May include a presenter plus active co-presenter(s) or a group enacted event, as long as it is one single presentation, workshop or enactment.

**MULTI-SESSION PRESENTATION**- Pre-organized Symposium, Pre-organized Panel, or Special Event with multiple presentations.

**POSTER PRESENTATION -** Theory or research paper presentation by single or multiple presenter(s) or co-authors to be posted on a 30"x40" foam board and easel with presenter(s) available for discussion during a 2-hour plus session. Posters will remain available for viewing the remainder of the day.

**Please select: \***

|  |
| --- |
|  **Single Presentation** |
|  **X Multi-Session Presentation** |
|  **Poster Presentation** |

**ETHICS AND PRINCIPLES OF COMMUNITY.**Check here that you have read and agree to adhere to the IASD ethics statement and honor the IASD Principles of Community. Refer to the short version in the Call for Presentation instruction page under Ethical Guideline. The formal version of both can be accessed from (<http://www.asdreams.org/ethics-and-confidentiality/>). Acceptance requires agreement.\*

|  |
| --- |
| Yes |

**COMMERCIAL SUPPORT/SPONSORSHIP.** Did you or any of the presenters receive commercial support or sponsorship for any aspect of the preparation or delivery of your presentation - OR - is there any other relationship "that could reasonably be construed as a conflict of interest? If yes, please specify here and disclose this information in your abstract and during your presentation. Note that overt promotion or sale of products or services during your presentation is prohibited. \*

|  |
| --- |
|  No  Yes |

**PRESENTATION INFORMATION**

**LINGUISTIC RESTRICTIONS**. All presentations are to be delivered in International English**.**

**TYPE OF PRESENTATION for Multi Presentation Submissions.**
**~ Symposium** - 1 to 2 hour pre-organized seminar or special event with typically two to four presentations (30 minutes per person maximum, including Q&A) sharing a common theme.
**~ Panel** - 1 to 2 hour panel with typically two (60 min), three (90 min), or four to six panelists (2hr) panelists discussing and answering questions on a common topic; perhaps preceding the discussion period may be short presentations of 10 minutes to 15 minutes max. per panelist.
**~** **Special Event** - a typically 1 hour pre-organized, often multiple presentation/presenter, event that is artistic, uniquely innovative (such as a film), or participatory. The schedule is limited, but please note if more time is requested.

**Type of presentation:**  **\***

Symposium

Panel

Special Event

**For Multi Presentations, enter in the "Session Level" Info below. Details for each presentation within the Multi-Presenter Session will be collected in a later section.**

**SESSION TITLE.** **(100 characters max)** In Title Case.

\*

  

0/100 characters

**PRESENTER LISTING.**

In the box below, please list yourself plus others who will be physically presenting,**In the order they will present.** This is the order that the names will appear in the program (names only, omit credentials). Identify ONLY those actively presenting; the names of additional co-authors may be included in your abstract. Place the words (**Chair**) or (**Moderator/Discussant**) in brackets to identify who will chair or moderate the session (a Moderator or Discussant does not present, but a Chair may).

\*

**SESSION SUMMARY.** **(50 words max)**

**\***

0/50 words

**SESSION ABSTRACT. (600 words max)** Include:

The lead presenter or session organizer shall compile an abstract that represents all of the presentations within the **total multi-presenter session** (perhaps have each presenter contribute 100 words or so). Abstract should contain:

a)Title of the session;

b)Note (not to publish) in brackets ONLY if you do not wish to have us post the abstract;

c)Presenter(s) and co-authors names and credentials;

d)Summary descriptions of each presentation.

e)End with a target audience notation (Introductory, Intermediate, Advanced, for All).

\*

0/600 words



**TRACK**. Theme track into which your submission best fits. (Note schedule limitations may dictate final track assignment.). \*

Clinical Approaches

Culture and History

Dreams and the Arts

Dreams and Ethnicity

Dreams and Health

Dreamwork Practices

Education (teaching dream studies)

Extraordinary, Psi, and Lucid Dreams

Mental Imagery

Religion, Spirituality, and Philosophy

Research

Theory

**ONSITE PRESENCE****.** We may offer a few Hybrid (Onsite/Virtual) presentations, limited again for practical reasons to a few lecture-style presentations of select topics yet to be determined. For your presentation, indicate whether you plan to present ONSITE or can ONLY present VIRTUALLY this year. Note that we may only be able to accommodate a few virtual requests and that onsite presentations will have scheduling and approval priority. \*

\_\_\_\_ Onsite

\_\_\_\_ Virtual Only

**ONLINE COURSE.** If you wish to have part or all of the presentation considered for an online course (which may include Zoom based video/audio and screen shared visuals/PowerPoint as applicable) answer yes or no below. CE qualified presenters will be sent an invitation and online form after the conference to provide APA required quiz questions (4 per half hour).

\*

 Yes

 No

**RECORDING.** Although we cannot guarantee that any sessions will be recorded, IASD reserves the right to record all papers, seminars, panels, and presentations to benefit attendees who cannot attend all they might wish to, and for the purpose of general sales during and after the conference. Artistic and dream sharing events (Workshops, dream groups) will NOT be recorded, nor does IASD permit video recording of any session without the express permission of IASD nor any workshop sessions without the express permission of all present. Sessions will be Zoom recordings (Video and Audio). During these sessions, be prepared that some attendees may also use smart phones to photograph or record parts of your presentation. Knowing this you should structure your presentations accordingly. We may not be able to accept lecture presentations that cannot be recorded by IASD. Please indicate that all presenters in this session understand and agree to this requirement. If you have a special request, note it in the comments box. \*

|  |
| --- |
|  Yes, I understand and agree to this recording requirement. |

**AUDIO-VISUAL (AV) AIDS.** Select the AV required for all presentations/presenters within this submission. Presenters are requested to convert all Visuals (PowerPoint etc.) and Videos to Windows format loaded onto a thumb drive – and to use the room computer except under extraordinary circumstances. Since all recorded sessions will be Zoom based, the room computer must be used, the only alternative being that the presenter uses their computer to Zoom into the session. We cannot guarantee MAC compatibility, connectivity or tech support. Instructions to presenters, including AV connectivity, will be sent about 1 month prior to the conference. Available AV is as follows:

* **DPL -**Digital Projector; Windows PC Laptop w/USB port; Screen; and room sound connection
* **LM -**Lavaliere microphone, will be placed at podiums for primary presenter
* **TM –**Handheld Microphone on speaker table used primarily for panels
* **FM – Handheld Microphone with Floor Stand and long cord, primarily for audience Q&A.**
* **FC -**Flip chart mounted on an easel with pens
* **CDP -**Portable CD player with speakers for playing music
* **Pod -**Podium (may be floor or table type depending on availability)

**AV is a major expense so please select ONLY the available AV equipment items you require. \***

|  |
| --- |
|  DPL LM TM FM FC CDP Pod |

**OTHER AV REQUESTED.** **(255 characters max)** If equipment other than what is listed above is needed, please specify in the box below. However, we do NOT guarantee it can be provided. Unless readily available, you may be asked to provide it yourself or pay for the rental.

0/255 characters



**STANDARD SPACE SETUP.** Please specify which of the standard setup arrangements, listed below, are required. Note: If you move chairs, please return chairs to the original configuration.DO NOT move the AV setup.

* **THEATER –** seating in straight rows with speaker table and/or podium up front for lectures, symposia, panels, and some workshops that are more interactive lecture/training based.
* **SEMI-CIRCULAR -** theater style with a curved setup of chairs focusing on the presenter's chair or podium up front. This option (rather than circular) is offered to accommodate the different presentation styles that will be scheduled into the room. Chairs can be moved into a circle, but please move them back afterwards.
* **ART TABLES –** tables and chairs typically for art workshops (note that space may be limited to 24 to 30 and there is typically no AV in these rooms).
* **OPEN SPACE -** for special activities requiring an open space with no chairs (or chairs stacked around the side).

Final arrangements may be room assignment and space-dependent and not always exactly what is requested.  **Please select the desired space setup from the drop-down list**: \*

 Theater

 Semi-circular

 Art tables

 Open space

**SETUP NOTES.** **(255 characters max)** Adjustments to the above space setup options (for example Circular for dream groups). May not be possible, but please specify if desired.

0/255 characters

**ATTENDANCE LIMITS.** Indicate the maximum number here **only if you wish to limit the number of attendees**. Leave blank if no limits. Signup sheets will be provided during onsite registration.





**INFORMATION ON THE INDIVIDUAL PRESENTATIONS IN THE SESSION**

**Please enter information about the individual sessions in the order that they will be presented**.

**PRESENTATION #1**

**Talk Title 1. (100 characters max)** In Title Case. **\***

0/100 characters

**Name(s) 1 as You Want it (them) to Appear in the Program.** List the presenter’s NAME and ONLY Co-presenters who will be physically attending and actively presenting at the conference (do not list co-authors: they may be included in the session level abstract).**\***

**First Name 1** **and/or initials.** \* 

**Last Name 1.** **\*** 

**Email address(es) 1.** List the email address of the presenter and any co-presenters of this talk (ONLY those physically attending and actively presenting), separated by semi-colons (;). **\***


**Brief biography 1. (70 words max)** Name, credentials/certifications (MA, PhD, etc.), country of residence and a brief biography of only the presenter (no co-presenters) that touches on formal training, career positions, publications, books, and/or awards if applicable. \*

0/70 words

**Summary of Talk 1. (50 words max)** **\***



0/50 words

**PRESENTATION #2**

**Talk Title 2. (100 characters max)** In Title Case. **\***

0/100 characters

**Name(s) 2 as You Want it (them) to Appear in the Program.** List the presenter’s NAME and ONLY Co-presenters who will be physically attending and actively presenting at the conference (do not list co-authors: they may be included in the session level abstract).**\***



**First Name 2** **and/or initials.** \* 

**Last Name 2.** **\*** 

**Email address(es) 2.** List the email address of the presenter and any co-presenters of this talk (ONLY those physically attending and actively presenting), separated by semi-colons (;). **\***


**Brief biography 2. (70 words max)** Name, credentials/certifications (MA, PhD, etc.), country of residence and a brief biography of only the presenter (no co-presenters) that touches on formal training, career positions, publications, books, and/or awards if applicable. \*

0/70 words

**Summary of Talk 2. (50 words max)** **\***



0/50 words

**PRESENTATION #3**

**Talk Title 3. (100 characters max)** In Title Case.

0/100 characters

**Name(s) 3 as You Want it (them) to Appear in the Program.** List the presenter’s NAME and ONLY Co-presenters who will be physically attending and actively presenting at the conference (do not list co-authors: they may be included in the session level abstract).



**First Name 3** **and/or initials.** 

**Last Name 3.** 

**Email address(es) 3.** List the email address of the presenter and any co-presenters of this talk (ONLY those physically attending and actively presenting), separated by semi-colons (;).


**Brief biography 3. (70 words max)** Name, credentials/certifications (MA, PhD, etc.), country of residence and a brief biography of only the presenter (no co-presenters) that touches on formal training, career positions, publications, books, and/or awards if applicable.

 

0/70 words

**Summary of Talk 3. (50 words max)**



0/50 words

**PRESENTATION #4**

**Talk Title 4. (100 characters max)** In Title Case.

0/100 characters

**Name(s) 4 as You Want it (them) to Appear in the Program.** List the presenter’s NAME and ONLY Co-presenters who will be physically attending and actively presenting at the conference (do not list co-authors: they may be included in the session level abstract).



**First Name 4** **and/or initials.** 

**Last Name 4.** 

**Email address(es) 4.** List the email address of the presenter and any co-presenters of this talk (ONLY those physically attending and actively presenting), separated by semi-colons (;).


**Brief biography 4. (70 words max)** Name, credentials/certifications (MA, PhD, etc.), country of residence and a brief biography of only the presenter (no co-presenters) that touches on formal training, career positions, publications, books, and/or awards if applicable.

 

0/70 words

**Summary of Talk 4. (50 words max)**



0/50 words

**PRESENTATION #5**

**Talk Title 5. (100 characters max)** In Title Case.

0/100 characters

**Name(s) 5 as You Want it (them) to Appear in the Program.** List the presenter’s NAME and ONLY Co-presenters who will be physically attending and actively presenting at the conference (do not list co-authors: they may be included in the session level abstract).



**First Name 5** **and/or initials.** 

**Last Name 5.** 

**Email address(es) 5.** List the email address of the presenter and any co-presenters of this talk (ONLY those physically attending and actively presenting), separated by semi-colons (;).


**Brief biography 5. (70 words max)** Name, credentials/certifications (MA, PhD, etc.), country of residence and a brief biography of only the presenter (no co-presenters) that touches on formal training, career positions, publications, books, and/or awards if applicable.

 

0/70 words

**Summary of Talk 5. (50 words max)**



0/50 words

**PRESENTATION #6**

**Talk Title 6. (100 characters max)** In Title Case.

0/100 characters

**Name(s) 6 as You Want it (them) to Appear in the Program.** List the presenter’s NAME and ONLY Co-presenters who will be physically attending and actively presenting at the conference (do not list co-authors: they may be included in the session level abstract).



**First Name 6** **and/or initials.** 

**Last Name 6.** 

**Email address(es) 6.** List the email address of the presenter and any co-presenters of this talk (ONLY those physically attending and actively presenting), separated by semi-colons (;).


**Brief biography 6. (70 words max)** Name, credentials/certifications (MA, PhD, etc.), country of residence and a brief biography of only the presenter (no co-presenters) that touches on formal training, career positions, publications, books, and/or awards if applicable.

 

0/70 words

**Summary of Talk 6. (50 words max)**



0/50 words



**BOOKLIST FOR THE BOOKSTORE.** It is not permitted to sell your books or products in the session spaces – these must be sold through the bookstore. Please list any books that the presenters in this session have authored or co-authored, that you would like the bookstore to consider carrying at the conference. IASD cannot guarantee that the bookstore (which is independent from IASD) will be able to make all requested books available. If the book is self-published/print-on-demand designate “Self” as the publisher. If self-published or unavailable, you will receive an agreement form so that you can bring them to be sold. Note that you are responsible for picking up the books at the time noted on the Schedule or they may be discarded. You may list up to 3 books from each presenter as follows, in the priority order you wish the bookstore to attempt to obtain them:

* 1st Presenter’s Name:
1. Author; Title; Publisher; Year; ISBN
2. Author; Title; Publisher; Year; ISBN
3. Author; Title; Publisher; Year; ISBN
* 2nd Presenter’s Name: (etc. as per above)



**SCHEDULE RESTRICTIONS.** **(255 characters max)** All presenters are expected to attend the entire conference. However, if not practical, specify **dates or times of day you will** **NOT be available to present**: indicate "not available on (*date*) or (*dates*)." We will attempt to meet these requests, but such limits can risk rejection of this submission if the schedule does not permit. Changes may not be possible once scheduled. Check the Schedule-at-a-glance template on <http://iasdconferences.org/2023/> under Program > Schedule at a Glance for planning.



0/255 characters

**SPECIAL REQUESTS OR COMMENTS**. We will attempt to honor and answer your requests but please realize it is not always possible to do so. Also include here any information about anyone assisting the Lead Presenter including name, role and phone number.

**NEXT STEP**

**After collecting all the information you need in this SAMPLE FORM, return to** [**http://www.iasdconferences.org/2023/call-for-presentations/**](http://www.iasdconferences.org/2023/call-for-presentations/) **and under step #3, click on the button labelled CLICK HERE FOR ONLINE PRESENTATION SUBMISSION FORM. Then cut/paste the information collected here into the appropriate ONLINE SUBMISSION FORM.**