



2025 Ainsworth Connector Convention Mini Clinic Proposal Form

Mini Clinic Title:

Summary:

Full Description:

Workshop Materials:

Special Support Requirements:

Clinician Information (only bio will be public, all other information is kept private)

Biography:

Email:

Phone (primary):

Phone (backup):

City, State/Province:

Permission to Post Your Presentation: Yes
No

Please print and mail in completed form to:

ATTN: 2025 Convention Committee
5th Division, PNR, NMRA
P.O. Box 3065
Spokane, WA 99220