RIMS WESTERN REGIONAL 2025 SPEAKER SUBMISSION FORM

We encourage partial submissions. Providing session title, description, and key take-a-ways, and intended speakers so agenda planning can be done as early as possible.

COORDINATOR CONTACT INFORMATION:				
Name: Title: Business Name: Email: Phone:				
SPEAKER(S) IN	FORMATION: (#RIMSWRC limits panels to a maximum of 4 individuals)			
Name: Title: Business Name: Email & Phone: LinkedIn:				
Name: Title: Business Name: Email & Phone: LinkedIn:				
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Practitioner Only S	Session: OR	Service Provider Session:	(requires gold or platinum sponsorship)
Service providers include products and/or services		, companies or individual who sells ins	urance related products, legal, accounting, or financial
Session Title:			
pe brief and catchy)			
Session			
Description: 150 word limit)			
earning			
Objectives: 4 bullet point limit)			
Session Format:	Solo Presenter		
	Panel Fireside Chat		
Sponsor Sessio	n Acknowledge	ement	

We look forward to reading your submission!

www.rimswesternregional.com.

Please email the completed form to events@consultrhino.com!