Speakers Pre-Trip Form

## South Central Telehealth ForumA Partnership between South Central, Mid- Atlantic, and Upper Midwest TRCs

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| **Name** |  |
| **Email** |  |
| **Cell Phone** |  |
| **Mailing Address** |  |
| **Hotel****Information** | The SCTRC will make your reservation and pay for the conference room rate and applicable taxes. Please indicate the dates of your stay: * + July 31 & August 1
	+ August 1 & 2
	+ Staying one night (insert date here):\_\_\_\_\_\_\_\_\_\_\_

*A credit card is required for incidentals and any expenses outside of these dates.* |
| **Transportation** | Please indicate whether you are * + driving
	+ flying
* *If driving, reimbursement is 0.42 per mile from your home address to the conference hotel and back.*
* *Flights must be* ***pre-approved***
* *A* ***free airport shuttle*** *is available through the conference hotel. Please use that. Cabs /other transportation between the airport and hotel are not reimbursable.*
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| **Driving**  | Estimated mileage one way. Please use this link, which is our state agency approved site: <http://www.randmcnally.com/>  |
| **Flying** | Flight to Nashville arriving from: Returning to:Flight dates:Estimated cost:*Flights must be pre-approved*. (regular/coach flight only–due to state agency regulations) |
| Contact | Contact info@learntelehealth.org with travel questions.  |