

## CALL FOR PAPERS/POSTERS

2010 World Aquatic Health™ Conference

October 6-8, 2010 • Colorado Springs, CO

You are cordially invited to submit a presentation for the 2010 World Aquatic Health™ Conference sponsored by the National Swimming Pool Foundation®. *Presentations for this conference will be videotaped for future web viewing.* By completing the following information and signing on the last page, you agree to your image/presentation being used for this purpose.

\*\*\* This form is available in electronic format by sending an e-mail to [media@nspf.org](mailto:media@nspf.org)\*\*\*

### **PRESENTATION SUBMITTER INFORMATION**

Name of Submitter	_____
CPO® or Instructor No. (if applicable)	_____
Title	_____
Company Name	_____
Mailing Address	_____
City/State/Zip Code	_____
Country	_____
E-Mail Address	_____
Telephone	_____
FAX	_____

#### **CHECKLIST:**

**The following document must be attached to your abstract submission.**

- Completed Presentation Submitter Information Form – Must be received **not later than Monday, February 1, 2010**. The Poster session deadline is Wednesday, March 31, 2010.

## ***ABSTRACT AND AUTHOR INFORMATION FORM***

In order for this form to be accepted, **all** fields must be completed in a legible format.

Poster/Presentation Title <i>(128 Characters and Spaces Maximum)</i>	
Subject Area Topic	<input type="checkbox"/> Protecting Bathers <input type="checkbox"/> Encouraging More People to Aquatics
Audience to Whom Presentation is Targeted	<input type="checkbox"/> Pool and Spa Operators and/or Instructors <input type="checkbox"/> Public Health Officials <input type="checkbox"/> Aquatic Facility Directors <input type="checkbox"/> New Technology Scientists and Marketers <input type="checkbox"/> Academic and Industrial Researchers <input type="checkbox"/> Technical Educators <input type="checkbox"/> Builders <input type="checkbox"/> Retailers <input type="checkbox"/> Health/Rehabilitation <input type="checkbox"/> Other

### **CORRESPONDING AUTHOR** *(one only)*

Title	_____
First Name	_____
Middle Initial	_____
Last Name	_____
Suffix <i>(if applicable)</i>	_____
CPO® or Member No. <i>(if applicable)</i>	_____
Position	_____
Company	_____
Mailing Address	_____
	_____
	_____
City/State/Zip Code	_____
E-Mail Address	_____
Phone	_____
FAX	_____

\* \* \* *Attach list of similar information for each co-author* \* \* \*

## RESEARCH SUMMARY

Will this or similar work have been published or presented by October 1, 2010?  Yes  No

If "yes," where? \_\_\_\_\_

If "yes," when? \_\_\_\_\_

## ABSTRACT GUIDELINES

Maximum of 4,000 characters and spaces. No supplemental materials will be accepted. Insert the text of your abstract below.

## BIO OF SUBMITTER

Insert the text of your bio below.

## SUBMISSION GUIDELINES

All submissions must comply with the following guidelines. Failure to observe these requirements may result in submission errors or rejection of the abstract during the review process.

- **Complete the submission by the deadline** – Presentation submitter information received after midnight Mountain Time on Monday, February 1, 2010, will not be considered. Poster research paper submissions received after Wednesday, March 31, 2010 will not be considered. Submit early to avoid heavy traffic at the deadline, which may cause errors that prevent successful submission.
- **Provide all required information** – Only those submissions which contain complete information will be considered.
- **Comply with the abstract size limitation** – Abstract text may be no longer than 4,000 characters (including spaces).
- **Omit graphics, attachments, or other additional information** – Abstract submissions are limited to text only. No graphics, attachments, or addenda will be considered.
- **Receipt of your submission will be confirmed by e-mail** - A confirmation e-mail will be sent to the e-mail address entered on the form.

If you have questions or problems with your submission, contact the National Swimming Pool Foundation at 719.540.9119 for assistance.

*All presentations for this conference will be videotaped for future web viewing.* By signing below, you agree to your image/presentation being used for this purpose.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date