



## Diamond Rails Forever 2019

2019 PCR/FRRS Joint Convention  
McClellan Park, CA, May 2 – 5, 2019

### Clinic Presenter Information Sheet

**Name** \_\_\_\_\_  
(As it should appear in our program)

**Street Address** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **ZIP** \_\_\_\_\_

**Phone Number** \_\_\_\_\_

**Email Address** \_\_\_\_\_

**Clinic/Oral History Title** \_\_\_\_\_

**Clinic/Oral History Description** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**A-V Needs:** Digital Projector \_\_\_\_\_ Slide Projector \_\_\_\_\_ White Board \_\_\_\_\_ Other \_\_\_\_\_

**Room Set-up:** Theater style \_\_\_\_\_ Classroom (tables) \_\_\_\_\_ Other \_\_\_\_\_

**Clinic Schedule Preferences** (Please indicate when you would be available to present your clinic(s) by indicating "A" for times you think you would be available and "N" for times you will not be available.)

Thursday Morning 5/2 \_\_\_\_\_ Thursday Afternoon 5/2 \_\_\_\_\_ Thursday Evening 5/2 \_\_\_\_\_

Friday Morning 5/3 \_\_\_\_\_ Friday Afternoon 5/3 \_\_\_\_\_ Friday Evening 5/3 \_\_\_\_\_

Saturday Morning 5/4 \_\_\_\_\_ Saturday Afternoon 5/4 \_\_\_\_\_

Thank you for agreeing to participate in our convention.

Please return this completed form to:  
Dave Bayless, 8231 Holly Oak St, Citrus Heights, CA 95610  
or email to [DRF2019clinics@pcrnmra.org](mailto:DRF2019clinics@pcrnmra.org)  
Phone: (530) 613-5784