

MOBILITY

GLOBAL FORUM

JANUARY 15-16, 2025

SPEAKER APPLICATION

SPEAKER INFORMATION:

Name: _____

Title: _____

Company: _____

SPEAKER FORMAT REQUESTED: (check all that apply)

- Keynote (subject to show management approval)
- Fireside chat with media moderator
- Panelist on a mutually agreed upon subject

SUGGESTED SESSION TOPIC: (please provide a brief description of the topic or topics that would be presented by speaker)

SPEAKER'S PRIMARY CONTACT:

Name: _____

Title: _____

Company: _____

Email address: _____

Primary phone number: _____

For questions please contact Mike Marchand, mike@fulkersongroup.com