

## SPEAKER AGREEMENT, CONFIRMATION AND RECORDING AUTHORIZATION FORM

Please complete the form, save it as a new PDF and send the PDF to Scarlet Fuentes: [sfuentes@acams.org](mailto:sfuentes@acams.org)

### Speaker Confirmation Form

**The following requested information will be included in our internal ACAMS Contributor Directory. Your full name, title/position and company will be included in conference materials and on your name badge. Please refrain from using abbreviations and ensure acronyms are spelled out.**

First Name:

Last Name:

Title/Position:

Company:

Street Address:

City, State and Postal Code (if applicable):

Country:

Office Phone Number:

Mobile Number (needed in case of on-site emergencies):

Email:

Fax:

Administrative Assistant Name:

Admin Email:

Admin Phone:

**The following information will be included in our internal Contributor Directory, which is used when selecting speakers **and moderators** for specific sessions for future events.**

Region:

- |                                        |                                        |                                         |
|----------------------------------------|----------------------------------------|-----------------------------------------|
| <input type="checkbox"/> United States | <input type="checkbox"/> Caribbean     | <input type="checkbox"/> Mideast/Africa |
| <input type="checkbox"/> Asia/Pacific  | <input type="checkbox"/> Europe        |                                         |
| <input type="checkbox"/> Canada        | <input type="checkbox"/> Latin America |                                         |

Which language(s) can you give business presentations? Check all that apply.

- |                                  |                                   |                                  |
|----------------------------------|-----------------------------------|----------------------------------|
| <input type="checkbox"/> Arabic  | <input type="checkbox"/> French   | <input type="checkbox"/> Russian |
| <input type="checkbox"/> Chinese | <input type="checkbox"/> German   | <input type="checkbox"/> Spanish |
| <input type="checkbox"/> English | <input type="checkbox"/> Japanese | <input type="checkbox"/> Other:  |

What industries/professions can you represent at an ACAMS program? Check all that apply.

- |                                                     |                                                   |                                                 |
|-----------------------------------------------------|---------------------------------------------------|-------------------------------------------------|
| <input type="checkbox"/> Private Bank               | <input type="checkbox"/> Real Estate              | <input type="checkbox"/> Government (Regulator) |
| <input type="checkbox"/> Correspondent Bank         | <input type="checkbox"/> CPA/Accounting           | <input type="checkbox"/> Insurance              |
| <input type="checkbox"/> Casino/Gaming              | <input type="checkbox"/> Law Enforcement          | <input type="checkbox"/> Law Firm               |
| <input type="checkbox"/> MSB                        | <input type="checkbox"/> Consultant/Advisory Firm | <input type="checkbox"/> Software/Technology    |
| <input type="checkbox"/> Insurance                  | <input type="checkbox"/> Credit Union             | <input type="checkbox"/> Other:                 |
| <input type="checkbox"/> Securities/Investment Firm |                                                   |                                                 |

Which of these topics can you cover at an ACAMS program? Check all that apply.

- |                                           |                                                 |                                                  |
|-------------------------------------------|-------------------------------------------------|--------------------------------------------------|
| <input type="checkbox"/> AML Overall      | <input type="checkbox"/> Cyber                  | <input type="checkbox"/> SARs/STRs               |
| <input type="checkbox"/> Fraud            | <input type="checkbox"/> KYC CDD                | <input type="checkbox"/> Anti-Bribery/Corruption |
| <input type="checkbox"/> TBML             | <input type="checkbox"/> Transaction Monitoring | <input type="checkbox"/> Tax Evasion             |
| <input type="checkbox"/> Chief AML        | <input type="checkbox"/> Sanctions              | <input type="checkbox"/> Ethics/Government       |
| <input type="checkbox"/> Fintech/Regtech  | <input type="checkbox"/> CTF                    | <input type="checkbox"/> Risk Assessment         |
| <input type="checkbox"/> Virtual Currency | <input type="checkbox"/> Investigations         | <input type="checkbox"/> Audit/Examinations      |

## Speaker Agreement Form

I accept the invitation to participate as a speaker at ACAMS events.

I understand my responsibilities, which include participating in session planning calls, preparing my presentation on the conference PowerPoint template, participating in networking events at the conference, and arranging and confirming my travel in accordance with the travel reimbursement policy (if applicable).

I understand ACAMS may record my session(s) at the conference, as audio, video, and/or photographic images. Those recordings, plus any materials I provide or contribute to, become the property of ACAMS. ACAMS may make that material available via live broadcast, post-conference on our websites, and/or reworked into other lengths and formats for use by ACAMS.

I understand that sessions may be attended by members of the media.

Type full name here as digital signature:

Date: