CALL FOR PRESENTERS: NORTH COUNTRY LEADERSHIP SUMMIT

Partners in Progress: Transforming Rural Healthcare Together

Please return this form, *saved as a PDF,* to ahisummit@ahihealth.org by 3PM on Tuesday, June 30, 2026.

The North Country Leadership Summit brings together leaders from New York's North Country and beyond, and is an opportunity to learn from experts on telehealth, population health, and advancing whole-person care.

We are seeking presentation proposals in the following topic theme areas:

Please check which topic theme most applies to your presentation.

- ◯ Strengthening the Rural Workforce
  - *E.g. regional workforce partnerships related to recruitment & retention, burnout prevention, building rural pipelines, supporting workforce wellbeing*
- ◯ Telehealth and Technology as Collaborative Tools
  - *E.g. technology partnerships that support care coordination and data sharing, broadband solutions, remote monitoring*
- ◯ Community-Driven Partnerships & Collaborative Leadership
  - *E.g. building and sustaining cross-sector partnerships, trust-building, and collaboration*
- ◯ Access, Equity, and Whole-Person Care
  - *E.g. healthcare and community-based organization partnerships addressing SDOH, behavioral health integration, aging populations*
- ◯ Policy, Funding & Sustainability for Rural Health
  - *E.g. aligning regional priorities to maximize impact, public-private partnerships that strengthen health systems, collaborative approaches to grant funding and sustainability*

Please indicate what presentation type you are applying for:

◯ Breakout Session ◯ Poster

CONTACT INFORMATION:

(IF MULTIPLE PRESENTERS, ADD EACH PRESENTER TO THIS FORM, DO NOT SUBMIT MULTIPLE FORMS)

Presenter Name (as you want it to appear in all Summit correspondence)

_____

Presenter Credentials (i.e. Education, Certification, etc.): _____

Title: _____

Organization: _____

Phone: _____ Email: _____

Address: _____

City, State, Zip: _____

Presenter Name (as you want it to appear in all Summit correspondence)

_____

Presenter Credentials (i.e. Education, Certification, etc.): _____

Title: _____

Organization: _____

Phone: _____ Email: _____

Address: _____

City, State, Zip: _____

Presenter Name (as you want it to appear in all Summit correspondence)

_____

Presenter Credentials (i.e. Education, Certification, etc.): _____

Title: _____

Organization: _____

Phone: _____ Email: _____

Address: _____

City, State, Zip: _____

ARE YOU A CURRENT PARTNER OR DO YOU PROVIDE SERVICES TO THE NORTH COUNTRY REGION?

_____

PRESENTATION DETAILS (PLEASE COMPLETE ALL FIELDS)

Title of Presentation or Panel Topic (please keep this to one sentence):

_____

Presentation Abstract (must be concise and accurate, describe and sell the presentation to event attendees):

Please List Learning Objectives of Presentation (must be in measurable terms):

Presenter 1 Biography (please keep this to no more than 3 – 4 sentences):

Presenter 2 Biography (please keep this to no more than 3 – 4 sentences):

Presenter 3 Biography (please keep this to no more than 3-4 sentences):

Please list any public-speaking experience (topics presented, events presented at, link to a video or audio recording):

PRESENTATION ¢¸t9

Are you open to presenting in another format from the one you listed above as a preference (i.e. breakout vs. poster)?

Yes ☐ No ☐

tw9{9b¢!¢lhb {¦.alL{{lhb

By checking this box, you agree to provide your slide deck to the Planning Team by **COB Wednesday, September 16, 2026.**

☐ **This only applies to Keynote, Plenary, and Breakout sessions.*

tIh¢h {¦.alL{{lhb

By checking this box, you agree to provide your photo to the Planning Team by **COB Friday, July 1, 2026.**

Yes ☐ No ☐ *By providing your photo, you are agreeing to allow your photo to be used in all Summit correspondence and marketing.*

HOTEL ACCOMMODATIONS

Please contact the Golden Arrow Lakeside Resort directly for room reservations. The rates available are $199/night. Reservations must be received by ***August 1, 2026*** to receive the above rate. We suggest you book your hotel room early as the room block will sell out. Golden Arrow Lakeside Resort reservations can be made by calling: 800.582.5540 and mention "North Country Leadership Summit".

**Travel and Accommodation Expense Reimbursement is not provided.*

ADDITIONAL INFORMATION

All presenters MUST check in on the day of their session *at least one hour* prior to their given presentation time.

We will be reviewing each presenter's application and will respond by Tuesday, July 14, 2026. Please reach out to the Summit Planning Team at (ahisummit@ahihealth.org) with any questions. All presenters who are selected will be registered by the event planning team.