

American Parkinson Disease Association of Mississippi
VOLUNTEER APPLICATION

SPEAKERS BUREAU (Please Complete)

1. Previous Speaking Experience: _____

2. Days available to speak: ' Mon. Tue. Wed. Thur. Fri. Sat. Sun.

3. Times willing to speak: Mornings Afternoons Evenings Any Time

4. Desired geographic area: _____

5. Topics on which you would be willing to speak:

- Activities for Patients (Home/Outside)
- Research Update
- Residential Care
- Caregiving
- Holidays
- Behavior Management techniques
- Overview of Parkinson's Disease Options
- Other (Please describe.)
- American Parkinson Disease Association of Mississippi
- Patient Communication Skills
- Home Safety
- Legal/Financial
- Psychiatric/Behavior
- Medical Problems
- Respite Care
- Bereavement
- Family Relationships

6. Audiences with which you are most comfortable:

- Professionals Physicians/Researchs Lay people
- Caregivers Media (TV/Radio) Corporations

7. Do you have a current Mississippi Drivers License? Yes No

8. Do you have current automobile liability insurance? Yes No