| IACP In Person Event Information Sheet | |
|---|--|
| Committee Name | |
| Name of Committee members attending | |
| Event Name: | |
| Total Places: | |
| IACP Member Cost: | |
| Date: | |
| Start Time: | |
| Finish Time: | |
| CPD Hours: | |
| Presenter Name: | |
| Presenter Bio: | |
| Workshop Outline: | |
| Verification of Presenters credentials: | |
| Zoom Link: | |
| Zoom Password: | |