

2025 Alliance Meeting Abstract Questionnaire



2025 Alliance Meeting Abstract Submission


Please provide us with some relevant details regarding your proposed session.

ALLIANCE MEMBERSHIP: *

Please select which of the Alliance member associations you are a member of. If you are not from a member association, please click "I'm an invited guest" in this list if you require special permission to present.

Select...

You are invited to present subject matter pertaining to any of the themes outlined below. All presentations must fit into one of these themes.

THEMES:	TOPIC SUGGESTIONS:
Unveiling value to your ALS/MND community	<ul style="list-style-type: none">Programs for PALS & CALS <div> Powered By PheedLoop</div> <ul style="list-style-type: none">Innovative projects and pilots (leading, collaborating, partnering)Research & ScienceCase study: Experiences, challenges, solutions and learnings from your ALS/MND community
Strategic Success	<ul style="list-style-type: none">Governance structure, Board Development, Membership policy, Codes of conductStrategic planningRisk management strategyBrand strategyDevelopment of partnershipsManaging changeCompetencies developmentRecent case study
Capacity Building	<ul style="list-style-type: none">Fundraising strategiesSuccession planning, onboarding & training, recruitment of staff and volunteersOperation management (equipment, technology, operational practices)Recent case study

THEMES: *

Please select which of the themes below is most relevant to your presentation.

Select...

SESSION DELIVERY: *

Please confirm that your intention is to deliver your session in person at the conference in Toronto, Canada.

- ☐ Yes! I will present in-person.
- ☐ No. I will be unable to attend in-person.

AUTHOR(S):

If you are presenting on published research, please list all authors.

BACKGROUND: (100 word limit) *

Please include a brief description of the topic you wish to present.

OBJECTIVE: (100 word limit) *

Please provide a brief outline of the primary objectives of this project and/or research.

Please review the following sections, and submit any questions or concerns to alliance@als-mnd.org.

Author Verification Agreement: *

The submitting Author must agree to and select the following "Author Verification Agreement" statement button below. By checking the box, you verify that each author/co-presenter to be listed on the submitted abstract has contributed to the content of the abstract and consented to the submission of said abstract.

- ☐ Confirm

Distribution Agreement: *

The corresponding Author must agree to and select "Distribution Agreement" button below. By checking this box, you verify that each author listed on the submitted abstract has agreed to permit the distribution of the abstract at the Alliance Meeting and/ or the Allied Professionals Forum and any other publication resulting from the Conference. The authors must also acknowledge that their session will be recorded. Under this constraint, you also verify that all contributing Authors will obtain or have obtained permission for the use of any copyrighted materials that may be presented at the Alliance Meeting and/or the Allied Professionals Forum for education purposes from the appropriate copyright owner(s) and publisher(s).

- ☐ Confirm

Conflict of Interest: *

The International Alliance of ALS/MND Associations require all Authors at the Alliance Meeting and/or the Allied Professionals Forum to disclose any actual or potential conflict of interest. The intent of this policy is not to prohibit speakers from presenting, but rather to allow audience members to form their own judgements about the presentation with the full disclosure of the facts. Any financial relationship, business or commercial, with sponsoring companies or organizations about whose product or services that the Author(s) are reporting must be disclosed. If such a financial arrangement exists, a disclosure statement must be emailed to jessica.mabe@als-mnd.org.

- ☐ Confirm

Cookies: *

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- ☐ I consent

Personal Information *

We require your consent to use your personal information (name, organization, country, email address).

- ☐ I consent
- ☐ I do not consent

Meeting Related Communications: *

Your consent is needed to share meeting related communications (pre-event, during the event and post-event) with you by email and/or phone (e.g. confirmation notices, receipts, post-event surveys, updates to schedules, information on how to locate event details, thank you for joining emails, etc.)

- ☐ I consent
- ☐ I do not consent

Attendance: *

Your consent is required so that the Alliance can document attendance at meetings, identify action items, contact you with updates regarding this event and other correspondence related to your role and/or attendance at the Alliance Meeting and/or Allied Professionals Forum.

- ☐ I consent

Filming & Photography: *

Per GDPR Regulations - we are obligated to notify participants that filming and/or photography is taking place at this event. When using images or recordings where individuals are featured prominently and are clearly identifiable, we are obligated to collect a consent form from those individuals who are featured prominently. Because you are submitting an application to be a speaker and/or poster presenter, we are required to obtain your consent to share your photo and likeness along with any videos that may be captured during these events.

- ☐ I consent

Submit