

Speaking / Workshop Request Form

(Please complete this form in its entirety)

<p>Choose One:</p> <p>Nonprofit</p> <p>School</p> <p>University/College</p> <p>Corporation</p> <p>Community Group</p> <p>Expo/Convention</p> <p>Conference</p> <p>Church Event</p>

<p>Purpose of Appearance (choose):</p> <p>Workshop/Seminar/Training (1+ Sessions)</p> <p>Keynote Address (20-45 minutes)</p> <p>Question and Answer (Q&A) Session (30-45 minutes)</p> <p>Seminar (45-90) minutes</p> <p>Double Block Booking (Negotiable)</p>
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Requestor/Authorized Party:

Name:	
Host/Sponsorships Institutions:	
Address:	
City:	
State:	
Zip Code:	
Phone:	
Fax:	
Email:	
Department:	
Other Contact:	

Title:	
Phone:	
Fax:	

Purpose of Appearance:

Program Title:	
Date:	
Start Time:	
End Time:	
Location:	
Venue Type (Convention center/hotel/church/etc:	
Promotional Interviews (Print/TV/Radio):	

NOTE: *The Host/Sponsor cannot revise schedule after contract execution without written permission.*

Audience Type:

Target Audience:	
Age Group(s):	
Anticipated Audience Numbers:	
More Details:	