

Speaker's Bureau Request Form

PRINT FORM

PLEASE FILL OUT FORM AND FAX TO: (760) 836-9300

Request Date: _____

Presentation Date: _____

Requesting Organization or Group: _____

Contact Name and Title: _____

Phone: _____ **Cell:** _____ **Fax:** _____

Mailing address: _____ **State:** _____ **Zip:** _____

<p>Presentation Date: _____ Time: _____ Expected Attendance: _____</p> <p>Location: _____</p> <p>Address: _____</p> <p>Directions: _____</p> <p>_____</p> <p>Assigned Presenter: _____ Phone: _____</p> <p>Information Requested: _____</p>
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Need from Development: _____

Presentation notes Donation envelopes Brochures for _____

Power Point presentation Laptop Projector

Follow Up/Notes: _____
