

Speaker Request

Company/Organization: _____ Division _____

Address: _____

Contact Person: _____ Phone: _____ Cell Phone #: _____

Submitted By: _____ Cell Phone # _____ Date: _____

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Special Instructions/Requests

Number of Speakers Needed _____

Preferred Speakers/Agencies: _____

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Speaker Engagement Information

Date:

Time of Meeting:

United Way Staff/Loaned Executive Present: yes no Campaign Video: yes no

Expected Attendance: _____ Length of Speech: _____

Location with Directions: _____

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Area of Interest

Please check the organization's area of interest. Speakers will be assigned accordingly.

Preparing Children & Youth to Succeed

Meeting Basic Needs & Self-Sufficiency

Health, Safety & Wellness

Speaker(s) assigned and cell phone number(s):

_____ Phone # _____

_____ Phone # _____

_____ Phone # _____

_____ Phone # _____