

# SPEAKER REQUEST FORM

*Speaker must receive this completed form before engagement can be confirmed*

**Chapter, Network, Council Name:** \_\_\_\_\_ **Date of event:** \_\_\_\_\_

## EXPENSE REIMBURSEMENT

Chapters, networks and councils are responsible for the speaker's expenses. **Travel expenses are 36 cents per mile or the cost of an airline ticket, plus hotel, airport parking, meals and incidentals.**

- Chapter/Network will make and pre-pay all travel and lodging expenses
- Speaker will make own arrangements, and submit receipts or invoice(s). Chapter/Network will reimburse expenses as incurred by the officer.
- Speaker will stay at hotel or motel.

*(Please reimburse mileage prior to or at the event).*

## PERSON RECEIPT/INVOICE(S) ARE TO BE SENT TO

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Day phone: \_\_\_\_\_

Eve. phone: \_\_\_\_\_

Cell phone: \_\_\_\_\_

Fax: \_\_\_\_\_

Email: \_\_\_\_\_

## TRANSPORTATION

If speaker is flying to your event, will someone meet her and return her to the airport?

- YES
- NO
- Meet at baggage claim
- Meet at the gate

## TRANSPORTATION CONT'D

Specify contact name and phone number:

Name: \_\_\_\_\_

Day phone: \_\_\_\_\_

Eve. phone: \_\_\_\_\_

Cell phone: \_\_\_\_\_

## EQUIPMENT AVAILABLE (If Speaker Requests)

- Podium
- Microphone
- Overhead Screen & Projector
- TV/VCR
- Flipchart / Easel / Markers
- Slide projector
- Presenter's work table
- Table for handouts

## MEETING PLACE AND DIRECTIONS

Name of meeting place: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Directions if speaker is driving to your event:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

