

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:

