



SPEAKER OR TABLING APPLICATION

Organization: _____

Organization Address: _____

Event Address: _____

Event Date: _____ Event Time: _____

Contact Name: _____

Phone: _____ Event-Day Phone: _____

Request is for: _____ Speaker, or _____ Tabling

Detailed description of event, including target audience, format, pertinent information such as food being served, religious ceremony, languages other than English, etc.:

Number of Participants Expected: _____

Is there any specific information you would like us to bring for distribution?

Who are other organizations/vendors who will attend?

Please email this form to:
Jessica Bell: jbelle@komenupstateny.org
You will be contacted once the form is received