

## Office of Mayor-President Monique B. Boulet

City of Lafayette/Parish of Lafayette

## **SPEAKING ENGAGEMENT FORM**

(Please return completed form within 48 hours of receipt)

\*Speaker requests should be made at least 2 weeks in advance.\*

Requesting Organization's Information

Name of Organization	n:						
Name of Requestor:							
Telephone Number:			Email:				
Purpose of Organiza	tion:						
		Event Inf	<u>formation</u>				
<b>Event Type:</b>			Theme/Focus:				
Date of Event:		I	Event Time:	AN	I/PM until	AM/PM	
Address of Venue:							
Description of Mayor Should a scheduling speak on behalf of the	conflict oc	cur, can another me		cutive to	eam Yes	No	
Arrival time:	AM/PM	Speaking time:	AM/PM	until	AM/P	PM	
Assigned Greeter:			Reserved par	rking pr	ovided?		
Podium? Yes	No	Wireless Mic?	Yes No	Exp	ected Attend	lance:	
Projector or Display	Screen?	Yes No	Indoor or Out	tdoor?	Indoor:	Outdoor:	
VIPs/Officials of Note:							
<b>Event Day Contacts:</b>	ent Day Contacts: Name			Cell Phone Number			
** Main Contact:						_	
Additional contact: Additional contact:							
Additional Notes or Special I	nstructions:						

\*Please include copy of agenda and/or order of speakers.\*