



# Speaking Engagement Request Form

## **Part I: Event Information**

Type of Event: \_\_\_\_\_

Day & Date of Event: \_\_\_\_\_

Event Start Time: \_\_\_\_\_

Event Finish Time: \_\_\_\_\_

Speaker Presentation Time: \_\_\_\_\_

Ability to use DVD? Yes/No: \_\_\_\_\_

Approximate number of people: \_\_\_\_\_

## **Part II: Event Contact**

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

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

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

City: \_\_\_\_\_ Zip: \_\_\_\_\_

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

E-Mail: \_\_\_\_\_

## **Part III: Event Location:**

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

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

City: \_\_\_\_\_ Zip: \_\_\_\_\_

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

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Please mail completed requests to **Joan Barno** as listed below:

**Cleveland Indians Speakers Bureau**

**2401 Ontario St.**

**Cleveland, OH, 44115**

**Attn: Joan Barno**

**Email: [jbarno@indians.com](mailto:jbarno@indians.com)**

*Please submit your form no less than three weeks prior to the date of your actual event.*

*You will be contacted as soon as a speaker is secured.*

**Go Tribe!**