

Face2Face Healing Speaking Engagement Request Form

Thank you for contacting Face2Face Healing. Please use this form to request a speaker. In order to better understand and prepare for the event and be able to reply with our availability, please provide the following information. You will be contacted within 48 hours of receiving the request with confirmation of availability. Please note that we are not able to promise our participation with your event, but will make every effort to accommodate your request.

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| Event name: | Event date: |
| Event start time: | Event end time: |
| Presentation/remarks start time: | Length of presentation/remarks: |
| Type of remarks: ___Welcome ___Introduction ___Presentation/Speech ___Panel | |
| Event location: | Sponsoring organization or name of class & course #: |
| Contact person name and title: | Phone: _____ Email: _____ |
| Description of event (include web link if available): | |
| Description of audience (demographics and size): | |
| Topic requested or suggested: | |
| What technical support will be available? | |
| Press or electronic media in attendance? ___ Yes ___ No | Will remarks be recorded? ___ Audio only ___ Video ___ None |
| Is a biography needed and if so, by when? | Is a photo needed and if so, what type and by when? |
| If a PowerPoint presentation is required, does a special template need to be used? Is it needed in advance or can it be brought on a flash drive? | |

Additional information: Please email agenda/schedule, website links and any other useful information to Karen Sculli, Executive Director, info@face2facehealing.org or fax to 844-323-4325

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| (For Office Use Only): Staff preferred: Karen Sculli___ Available? Yes___ No___ | Adriane Deithorn___ | Susan Donnan___ |
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