

Community Engagement Unit – Event Request Form

Background Informa	tion			
Event Title:				
Date and Time:				
Event Type (please se	lect):			
Presentation	C	ommunity Event	School Event	Other
Location:				
Point of Contact				
Name:				
Phone Number:				
E-Mail Address:				
Event Details				
Approximate Number of Attendees:				
Presentations Only –	Topic:			
Special Requests (be	descriptive	e):		
If requesting a presen	tation, do y	ou have the followin	g?	
Computer	Audio	Projector	A/V Equipment	Table