# 2016 CFC CHARITY DISPLAY & SPEAKER'S REQUEST FORM

**Requesting Agency:** _____ Today's Date: _____
*(No acronyms please)* *(mm/dd/yy)*

Head Coordinator: _____ Account ID: _____

Agency Contact (if not the Coord.): _____ Loaned Executive: _____

Contact Email Address: _____ Phone:

Event Address: _____

City: _____ State: _____ Zip: _____

Directions, Security, Parking or Special Instructions:

_____

## CHARITY DISPLAY

Event Date: *(mm/dd/yy)* Start Time: End Time: Setup Time:

Audience Size: Area/Room#: Total # charities requested: _____

I just want a variety of charities

I want specific charities (please list below)

Check here if kick-off event

*In efforts to match the interest of your employees, we suggest that you select a variety of organizations if requesting multiple charities. You are not limited on the number of charities to invite - this is based your availability of space for the event.*

Charity Name: _____ CFC #: _____ *Alternative:* _____ *CFC #:* _____

Charity Name: _____ CFC #: _____ *Alternative:* _____ *CFC #:* _____

Charity Name: _____ CFC #: _____ *Alternative:* _____ *CFC #:* _____

Charity Name: _____ CFC #: _____ *Alternative:* _____ *CFC #:* _____

More charities (include CFC#): _____

## CHARITY SPEAKERS

Date of Event: _____ *(mm/dd/yy)* Event Start Time: _____ Event End Time: _____

# of Speakers: _____ Audience Size: _____ Area/Room #: _____

Speaker #1 Requested: _____ CFC#: _____ Length of Presentation: _____

Speaker #2 Requested: _____ CFC#: _____ Length of Presentation: _____

Speaker #3 Requested: _____ CFC#: _____ Length of Presentation: _____

*(Should be no more than 5-7 minutes each)*

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***Submit request at least 3 weeks prior to event. Note: This request does not guarantee a charity's attendance. Please refrain from contacting a charity until you receive confirmation from CFC staff.***

*Complete one form per event and email to **Leilajones@heartlandcfc.org**. Thanks!*