



REQUEST FORM

- Complete name and complete address of your organization:

- Contact name, phone number, cellular, fax number or e-mail address if applicable:

- Name, description and purpose of event (ex: awards banquet, fund-raiser):

- Date & day of the week, time and where event will be held:

- Expected arrival time of speaker:

- Length of time you will need speaker or emcee:

- Expectation of speaker (topic) or emcee:

- Number of people expected to attend event:

- Directions to event:

Please email completed form to
Michael.Sexton@MecklenburgCountyNC.gov
or fax to 704-336-4198.

