

Outreach Event Request Form

Today's Date: _____ Event Name/Title: _____

Point of Contact Name: _____ Phone: _____ Email: _____

Organization/Business Hosting: _____

Event Date: _____ Event Time: _____ Set-up Time: _____

Location of the event: Virtual In-person Other: _____

If in-person, please list the address of the event: _____

Type of Event:

Information Table Speaking Engagement Training Presentation Other/Unsure

Please give us a short description of the event: _____

Topic of the Event:

YWCA Services Domestic Violence Sexual Assault Trauma Informed Care
 Racial/Social Justice Discuss With the Outreach Coordinator

Event Audience (**please check all that apply**): **Expected # of attendees:** _____

Youth College Students College Faculty/Staff General Public Private Business Staff
 Faith-Based Community Allied Professionals Other/Unsure

What will we need to bring? *Check all that apply.*

Computer USB Drive Projector Table Tent Other: _____

Is there a specific staff person requested? Yes No

If yes, please listed requested staff person: _____

Is free parking available? Yes No

Other details (internet access, building access, other needs, length of presentation time if different from event time, etc.): _____

Please note that a submitted request does not guarantee an event and is subject to staff availability.

Submit completed Event Requests to Royall Bryan at royall.bryan@ywca-shr.org.