

Mayor-President Speaker Request Form

Please fill out all applicable form fields and send to comsoffice@lafayettela.gov. Note: Speaking requests must be made at least 2 weeks in advance to be considered.

Requesting Organization's Informatio	n en
Organization Name	Today's Date
Phone Number	Requestor Name
Mailing Address	Email Address
Organization's Purpose/Mission:	
Event Information	
Event information	
Event Type	Theme/Focus
	AM/PM until AM/PM
Date of Event	Event Time
Venue Address	
Description of Mayor-President's Requested Pa	articipation: Please be specific.
Should a scheduling conflict occur, may anothe executive team speak on behalf of the Mayor-P	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1



Speaker Request Form Contd.

Event Information Contd.	
Arrival time: AM/PM Speaking time: AM/PM until AM/PM	1
Projector or Display Screen? Yes No Reserved Parking? Yes No	
Wireless Mic? Yes No Expected Attendance #	
Event Agenda/Program Available? No Yes Yes Podium? Yes No No If yes, please provide.	Э
Invited and/or Expected VIPs/Officials of Note:	
Event Day Contacts	
Name Cell Phone Number	
Main Contact:	
Additional Contact:	
Additional Contact:	
Additional Notes or Special Instructions:	

Note: The submission of this request form is not confirmation of Mayor-President Boulet's participation. Promotional materials featuring Mayor-President Boulet's name, image, or the like should not be published without prior approval.