



EVENT REQUEST FORM

CHAPTER INFORMATION

Chapter Name: _____

Chapter Address: _____

INSTRUCTOR INFORMATION

Instructor Name: _____

Instructor Phone #: _____

Instructor Email: _____

Booking Policy: Event Request forms must be received a minimum 7 weeks prior to classes that require tuition and 6 weeks prior to classes that are free. No events will be scheduled beyond 6 months unless required by a venue. Initial: _____

Cancellation/Rescheduling Policy: If an event is cancelled/rescheduled by the instructor, except for factors deemed out of his/her control, after the event has been scheduled/booked with a particular venue the instructor will be subject to a \$50.00 cancellation/rescheduling fee for each venue that needs to be cancelled/rescheduled. Initial: _____

Scheduled/Booked: A venue is deemed scheduled/booked when we have acquired a contract, and Instructor has received the event booked confirmation email from Event Registration. Initial: _____

Deemed out of our control: If the event is cancelled/rescheduled due to factors out of our control, i.e. weather, death in the family, or any other unforeseen reason, there will be no cancellation/rescheduling fee. Initial: _____

Cancellation/Rescheduling payment: Payment must be received within 48 hours of initial request or an additional \$25.00 per venue will be charged. The instructor will not be allowed to request new events until payment is received. Initial: _____

COURSE EVENT INFORMATION

Course Title: _____

Desired Venue: _____

Backup Venue 1: _____ Backup Venue 2: _____ Backup Venue 3: _____

Desired Dates & Times:
(Please list in order of preference)

1. Date: _____ 2. Date: _____ 3. Date: _____ 4. Date: _____ 5. Date: _____ 6. Date: _____

Time: _____ Time: _____ Time: _____ Time: _____ Time: _____ Time: _____

I would like to book a total of _____ dates at this venue.

Any additional dates are assumed to be backup dates if the first _____ are not available.

Comments:

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Course Title: _____

Desired Venue: _____

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Desired Dates & Times:
(Please list in order of preference)

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Comments:

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Time: _____ Time: _____ Time: _____ Time: _____ Time: _____ Time: _____

I would like to book a total of _____ dates at this venue.

Any additional dates are assumed to be backup dates if the first _____ are not available.

Comments:

ADDITIONAL EVENT INFORMATION

Please check equipment that you would like venues to provide for you, if available (this can sometimes be an extra expense for you, the CP)

- Screen Projector Laptop or Desktop Podium Registration Table

Special Requests: _____

Signature

Printed Name

Date