



SSANEE Training & Consulting Group

"Supplying Solutions & Answers for Negotiating with Education & Empowerment"

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EVENT REQUEST FORM

Complete the following form to bring the **D.I.V.A. of Dialog™** to your next event:

Code # _____

Name _____ Title _____

Company/School _____

Address1 _____

Address2 _____

City _____ State _____ Zip _____

Phone _____ Fax _____

Email _____

Please provide details on the event in which you need the **D.I.V.A. of Dialog™** to speak:

Name of Event _____

Type of Event _____

Purpose of Event _____

Expected Attendance _____ Percentage: Male _____ Female _____

Admission Fee _____ Date Preference #1 _____ #2 _____

Location of Event _____

Service Needed for Event:

<input type="checkbox"/> Keynote speech	<input type="checkbox"/> 2-hour seminar/workshop
<input type="checkbox"/> Moderate a panel	<input type="checkbox"/> 4-hour seminar/workshop
<input type="checkbox"/> Participate on a panel	<input type="checkbox"/> 6-hour seminar/workshop
<input type="checkbox"/> Serve as Mistress of Ceremonies	<input type="checkbox"/> Other _____
<input type="checkbox"/> 1-hour seminar/workshop	<input type="checkbox"/> Other _____

Budget for Event (e.g. \$2,500; \$4,500-\$6,000) _____

Comments: _____

Mail completed form to:

SSANEE Training & Consulting Group ♦ P.O. Box 804546 ♦ Chicago, IL 60680