SPEAKER'S BUREAU PRESENTATION REQUEST

Contact Information

Name of Group / Organization:	**TODAY'S DATE:**

Contact Name:	Email:
Phone:	Fax:

Address:

Desired topic/presentation (***Please select 3 topic options, starting with highest preference***):

(Option 1):

(Option 2):

(Option 3):

Date (***Please select 3 date options, starting with highest preference***):

(Option 1):

(Option 2):

(Option 3):

Desired Presentation Start Time:	Desired Presentation End Time:

Anticipated # of participants:

Does your organization have access to an online conferencing platform (Zoom, Webex, etc.)?

If so, please write the name of the platform here:

Comments:

How did you hear about our Network?

Please email to: AreaAgencyonAging@occr.ocgov.com, or fax to (714) 567-5021
Any questions, please contact the Speaker's Bureau Network representative, or the Call Center Manager at 714-480-6450