

INFORMATION NEEDED FOR EVENTS

EVENT NAME:

A descriptive title Please be aware that some media limit # of characters I can use so I may have to change your desired title.

PERFORMER(S) OR. PRESENTER(S):

PICTURES AND/OR WEBSITE OF ABOVE or RELATING TO ABOVE:

DAY AND DATE:

BEGINNING TIME AND DURATION:

WATERS HALL OR SANCTUARY:

COST: For the media, there is either a cost or it is free. If you want donations, it's "free" and you can have a sign requesting donations at the entrance.

NUMBER OF PARTICIPANTS (IF # IS LIMITED)

WHOM TO CONTACT FOR INFO IF **NOT** NAN AT THE OFFICE Name, plus phone number and/or email address

DESCRIPTION Lecture, discussion, workshop: Content (what it's about, what it'll include, why bother): Whatever bio info of presenter you happen to have: Etc,

Scan and email to: leiec@comcast.net Snail mail to: 491 Shamrock Drive, Venice 34293
Phone #:941-445-4859 Your name/phone/email _____