## Request for Speaker from Timpano Group

Organization Name:				
Contact Person Name:		Fax:		
City:			Zip:	
E-mail:				
Event Information				
Date Requested:		Alternate Date:		
Time Requested:			_ Alternate Time:	
Co-sponsor(s):				
Other Invited Guests/Media:				
Speaking Information				
ormat		□ Panel		
Topic(s) Requested:				
Time Allowed for Presentation:				
Group Information				
Type/Nature of Group:				
Anticipated Audience Size:				
How would you describe the meeting setting?	☐ Forma	1	□ Informal	
Meeting Information				
Location/Facility Name:				
Street Address:				
City/State/Zip:				
20.	<b></b>			
Microphone available? Podium available?	□ Yes □ Yes		□ No □ No	
Projector & Screen available?	□ Yes			
I IUICCIUI CA UCICCII availaule;	□ Yes		□ No	
Will you make travel/hotel accommodations?	-			
Will you make travel/hotel accommodations?  Additional Comments:				

Return this completed form to Timpano Group, 211 S. Paterson St., Ste. 280, Madison, WI 53703 or send it via fax to (608) 251-0803. For questions, contact Melanie Schmidt at (608) 251-0808 or info@timpanogroup.com