

**DeMonica D. Gladney**  
**SPEAKING ENGAGEMENT**  
**REQUEST FORM**

<b>CHURCH/MINISTRY/ORGANIZATION INFORMATION</b>	
<i>Name of Church/Ministry/Organization:</i>	
<i>Pastor's/Leader's Name:</i>	<i>Spouse's Name:</i>
<i>Denomination/Affiliation:</i>	
<i>Mailing Address:</i>	
<i>Phone Number:</i>	<i>Fax Number:</i>
<i>Email Address:</i>	<i>Website:</i>
<i>Event Coordinator:</i>	<i>Phone Number:</i>
<i>Alternate Contact Person:</i>	<i>Phone Number:</i>
<b>EVENT INFORMATION</b>	
<i>Name/Type of Event:</i>	
<i>Date/Time of Event:</i>	<i>Location of Event:</i>
<i>Theme of Event:</i>	<i>Attire for Event (e.g., semi-formal, formal, casual):</i>
<i>Type of Speaker Needed (e.g., keynote, workshop):</i>	<i>Allotted Speaking Time: (specify minutes)</i>
<i>Proposed Honorarium Amount:</i>	<i>Estimated Number of Attendees:</i>
<i>Other Special Guests:</i>	
<i>Event will be Advertised:</i> <input type="checkbox"/> Yes (when _____) <input type="checkbox"/> No	<i>Type of Advertising:</i> <input type="checkbox"/> Radio <input type="checkbox"/> TV <input type="checkbox"/> Print <input type="checkbox"/> Flyers <input type="checkbox"/> Other
<b>MEDIA INFORMATION</b>	
<i>Speaker Media Table Setup at Event:</i> <input type="checkbox"/> Yes ( <i>set-up time: _____</i> ) <input type="checkbox"/> No	<i>Volunteers Available to Work Media Table:</i> <input type="checkbox"/> Yes <input type="checkbox"/> No
<i>Audio/Videotaping of Event:</i> <input type="checkbox"/> Yes ( <input type="checkbox"/> Tape <input type="checkbox"/> CD <input type="checkbox"/> DVD) <input type="checkbox"/> No	<i>Copies Available at End of Event:</i> <input type="checkbox"/> Yes <input type="checkbox"/> No

*Please send this form to New Horizon Publishers  
by mail at 8325 Broadway, Ste. 202, Box 227, Pearland, Texas 77581 or  
via fax at (281) 489-5044 at least 3 weeks before the event*