Speaker Participation Form

Please **Complete** & **Fax Back** **ASAP** to: **(216) 651-7183**

Name (Presenter):	
Title:	
Company:	
Check one:	☐ Work address listed below ☐ Home address listed below
Address:	
Phone:	Cell:
Email:	

Presentation Details:

Presentation Topic:	
Objective:	

Date Preference for Presentation

(you will receive a confirmation via email with date and time selected)

Please check preferred time slots and provide dates:	**Wednesday** from 3:30 to 5 PM	**Thursday** from 3:30 to 5 PM	**4th Thursday of the Month** from 5:30 to 7 PM	
Audience Age Group:	14 to 18 year olds	14 to 18 year olds	14 to 18 year olds	
			"ELLA" Girls Club	**"ELLOS" Boys Club**
1st Choice Date:	☐	☐	☐	☐
2nd Choice Date:	☐	☐	☐	☐
3rd Choice Date:	☐	☐	☐	☐

Questions	Check One		Comments
1. Is this the first time you have made this presentation to teenagers?	☐ Yes	☐ No	
2. Would you be interested in presenting another topic at a later date? Please complete another speaker confirmation form.	☐ Yes	☐ No	
3. Will you be handing out materials and/or handouts?	☐ Yes	☐ No	
4. Will you need special equipment?	☐ Yes	☐ No	
5. Will you have giveaways or promotional items for the students?	☐ Yes	☐ No	
6. Will you be bringing additional personnel to assist you with your presentation?	☐ Yes	☐ No	
7. Could we give your contact information to our students?	☐ Yes	☐ No	
8. Would you like to know more on how you can form a partnership and/or sponsor an Esperanza Program and/or Activity?	☐ Yes	☐ No	
9. Will you like to be added to our mail list for future activities?	☐ Yes	☐ No	
10. Publicity Release - I, the undersigned, hereby consent to the reproduction and use of photographs, videotapes and / or audiotapes made of me during the presentation. I give Esperanza, my permission to use this material for advertising and promotional purposes. I understand that the photographs and or tapes may be used in publications and /or in local media. There are no limits on how long or how frequently this material may be used by the Esperanza.	☐ Yes	☐ No	

Agreement to participate in Esperanza's After-School Program

Print Name _____ Signature _____ Date _____

For Internal Use

Confirmation Sent by _____
On _____
On Student Calendar _____
Invoice # _____
Presenter # _____

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