



SPEAKER REQUEST FORM

(U.S. Army Tank-automotive and Armaments Command)



For TACOM PA use only

DATE RECEIVED:

REQUEST NUMBER:

PURPOSE: This form is used to request a member of the U.S. Army to speak at a public event. The information below is required to evaluate the event for appropriateness and compliance with DoD policies and for **coordination with the units involved**. Please complete all applicable sections – PRINT CLEARLY or type information and return the form to:

Community Relations/Speaker Request
U.S. Army TACOM Public Affairs
AMTA-PA, Mail Stop 432
6501 E.11 Mile Road
Detroit Arsenal, Michigan 48397

Date entered into Log:

Date first follow-up:

SECTION I – EVENT DATA

SECTION II – SPONSORING ORGANIZATION DATA

1. SPECIFIC REQUIREMENT (*i.e., Presentation, Keynote Speech, Career Day, etc.*)

1. NAME OF SPONSORING ORGANIZATION

2. TITLE OF EVENT (*Web site, if applicable*)

2. IS SPONSORING ORGANIZATION A CIVIC ORGANIZATION?

3. DATE OF EVENT AND TIME (YYYYMMDD)

3. NAME OF PRIMARY POC

4. EXPECTED ATTENDANCE AND AUDIENCE COMPOSITION

4. ADDRESS OF PRIMARY POC

5. EVENT SITE AND AGENDA -(*i.e., Auditorium, School, Convention Center, etc.*)

5. HOME PHONE AND E-MAIL ADDRESS OF PRIMARY POC

Phone

E-Mail

6. HAVE YOU HAD ANY PREVIOUS ARMY/MILITARY SPEAKERS AT YOUR EVENT?

6. WORK PHONE AND FAX NUMBERS OF PRIMARY POC

Phone

Fax

7a. IF OTHER DISTINGUISHED VISITORS/VIPs ARE INVITED, PLEASE SPECIFY.

7. NAME OF ALTERNATE POC

7b. ADDRESS OF ALTERNATE POC

7b. HAVE YOU INVITED THE MEDIA?

If yes, please specify name and media organization.

7c. HOME PHONE AND E-MAIL ADDRESS OF ALTERNATE POC

Phone

E-Mail

7d. WORK PHONE AND FAX NUMBERS OF ALTERNATE POC

Phone

Fax

8. IS THERE A CHARGE TO ATTEND THIS EVENT?	8. SITE CITY, STATE AND ZIP CODE
9. EVENT PROGRAM (<i>general itinerary</i>). Please attach an itinerary, if available.	9. DOES YOUR ORGANIZATION EXCLUDE ANY PERSON FROM ITS MEMBERSHIP OR PRACTICE ANY FORM OF DISCRIMINATION IN ITS FUNCTION BASED ON RACE, CREED, COLOR, SEX OR NATIONAL ORIGIN?
10. IS THIS EVENT BEING USED TO RAISE FUNDS? (<i>If yes, please explain.</i>)	10. IS THE EVENT OPEN TO THE PUBLIC? (<i>If no, please explain.</i>)
11. FUNDS WILL BE USED FOR (<i>X as applicable</i>)	11. IS YOUR ORGANIZATION WILLING TO PROVIDE FUNDING FOR ANY EXPENSES WHEN MILITARY RESOURCES ARE NOT LOCAL TO THE GEOGRAPHIC AREA OF THE EVENT AND NOT WITHIN THE BUDGET OF THE COMMAND? If yes, please specify in terms of travel, lodging, meals, etc.
12. CAN YOU FIND OTHER VENUES FOR THE SPEAKER IF HE/SHE TRAVELS TO YOUR LOCATION?	12. IS THE EVENT OPEN TO THE GENERAL PUBLIC?
13. IS YOUR GROUP ADVERTISING THE EVENT? If yes, how and where?	13. CERTIFICATION: I am acting on behalf of my sponsoring organization and certify that the information provided above is complete and accurate to the best of my knowledge. I understand that representatives from the U.S. Army TACOM Public Affairs will contact me to discuss arrangements and costs involved prior to final commitments, or to inform me of their inability to support this event. I also understand that operational commitments must take priority and can preclude a scheduled appearance at an approved public activity.
DATE SIGNED (YYYYMMDD)	SIGNATURE OF ORGANIZATION'S REPRESENTATIVE: <hr/>