



## Speakers Bureau Request Form

Requesting organizations are required to fill out this form in its entirety. Print this form, fill in completely, and send along with detailed sponsorship information regarding your organization and event.

Mail or email to: Marketing/Communications  
Attn: Patricia Buhl 433 Frye Farm Road, Upper West  
Greensburg, PA 15601  
patricia.buhl@independence.health  
Questions? Call: (724) 689-0202 or Fax to: 724-837-1652

**Organization Name:** \_\_\_\_\_

**Contact Name:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Address:** \_\_\_\_\_

\_\_\_\_\_

**Presentation Name:** \_\_\_\_\_

**Potential Dates of Presentation:** \_\_\_\_\_

**Location of Presentation:** \_\_\_\_\_

**Time of Presentation:** \_\_\_\_\_

**Objective:** \_\_\_\_\_

**Attendee Number:** \_\_\_\_\_

**Other Health Care Participants (if applicable)** \_\_\_\_\_