

Office use only:  
Need by: \_\_\_\_\_  
Received: \_\_\_\_\_



# Speaker Request Application

Are you interested in holding a free seminar or cooking class at Nature's Food Patch?

Please fill out the following form and e-mail it to: [events@naturesfoodpatch.com](mailto:events@naturesfoodpatch.com) or fax it to: 727-442-2050, Attn: Events Coordinator. Thank you.



Name of Speaker: \_\_\_\_\_

Speaker's Credentials (*here is a list of qualifications that we look for, but not necessarily require: MD, RDN, LN, RD, RYT*): \_\_\_\_\_

Name of Practice or Business: \_\_\_\_\_

Address:

Street: \_\_\_\_\_

City: \_\_\_\_\_

Zip: \_\_\_\_\_

How long in business?: \_\_\_\_\_ Is it a 501(c)3?  yes  no

Previous Speaking Experience:

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

Seminar Topics: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Presentation Materials Used: \_\_\_\_\_

\_\_\_\_\_

Day of Week & Time Desired: \_\_\_\_\_

Will you advertise the seminar? \_\_\_\_\_ If so, where? \_\_\_\_\_

\_\_\_\_\_

Please tell us why you would like to speak here: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Speaker's Contact:

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

Web site: \_\_\_\_\_



1225 Cleveland St • Clearwater, FL 33755 • 727-443-6703  
www.naturesfoodpatch.com



Office use only:

Approval: \_\_\_\_\_ Reply Date: \_\_\_\_\_

Notes: \_\_\_\_\_