

VETERANS OF FOREIGN WARS AUXILIARY

Department of Pennsylvania



4002 Fenton Avenue Harrisburg, PA 17109-5943 PH# 717-232-7604

EVENT ATTENDEE OR SPEAKER REQUEST FORM

We are pleased to respond to requests for Department representatives to attend and/or speak at an event that you are sponsoring. Please complete this form and return it to Department Headquarters, either by mail or by email (jodie@vfwauxpa.org). As schedules can fill up quickly, we would ask that you make your request 4 weeks prior to the date of the event. If you have any questions, please phone or email Department Headquarters.

Today's Date		
Name of person making this request:		
Contact Info: Phone	Email	
Post/Auxiliary		
Date of Event	_ Location of Event	
Description of Event		
Preferred Representative		
Department Representative will be th	e Keynote Speaker: Yes	No
Is the person making this request the	event organizer? Yes	No
If No, Who is the Event Organizer_		
Event Organizer's Phone Number_		
Any other information:		

Submit Request completed Request Form to Jodie@vfwauxpa.org