
Name of Workshop, Seminar,
or Speaking Event _____

Sponsoring Group _____

Name of Contact Person _____ Phone Number _____

Fax Number: _____ e-mail _____

Mailing Address: _____

MEETING SPECIFICS

Meeting Location _____

**Is meeting date fixed or tentative? _____

**Specific content to be covered _____

**Specific meeting times _____

**Actual speaking time during each meeting _____

All items with ** are issues that MUST be discussed prior to submission of this form.

After form completion mail to:
ARIEL Connections ☞ P. O. Box 22 ☞ Royal Oak, MI 48068-0022
☞ Southeast Michigan Call 313 719-1621
☞ Email: brenda.jenkins@ameritech.net ☞ Website: www.thebrendajenkins.com