



INVITE DOREEN TO SPEAK

Booking Request Form

Contact Information: (*required fields)

Date Submitted:

First Name*: _____

Last Name*: _____

Title: _____

Organization*: _____

Industry/Org Type: _____

Telephone*: _____

E-mail*: _____

Address*: _____

City*: _____

State*: _____

Zip*: _____

Country: _____

Event Name: _____

Event Start Date/Time: _____

Event End Date/Time: _____

Event Location: _____

Budget Range (not including travel): _____

of Speakers: _____

of Participants: _____

Additional comments (Please provide as much information about your event: themes, desired outcomes, etc...):

Please describe the event's format; i.e., Keynote, Lecture, Interactive Workshop, Retreat, Organizational Training:

Please complete Booking Request Form and email to:

office@DoreenLecheler.com