## Elder Monique Williams

**River of Life Ministries** 



## **Speaking Engagement Request Form**

(Please type information inside the box and e-mail request form to <a href="Mwmworldwide@yahoo.com">Mwmworldwide@yahoo.com</a>
All publications and marketing materials must be reviewed prior to official distribution.

Today's Date	Name of Person Authorizing This Request:				
/ /					
Name of Organization					
Address of Organization					
City	State	Zip	Country		
Name of Contact Person	Phone Number	•	Email Address		
Event Information					
Type of Event					
Eennt Theme and/or Scripture			Colors (If applicable)		
Event Address (if different from	the requesting organization I	isted above)			
City	State	Zip	Country		

<b>Event Date</b>	Start Time	End Time	Speaker Arrival Time
	J L		[
Number of Anticipated Participar	nts Special Parking I	nstructions for Speaker (if a	pplicable)
Address of Organization			
City	State	Zip	Country
<b>Honorarium Information</b>			
Honorarium Amount for Speaker	Honorarium Paymer	nt Process (please indicate who	en speaker will receive honorarium)
\$	<u> </u>		,
	] [		
Method of Payment Oth	ner (Please Indicate)		
Check or Cash			
Travel Accommodations			
<u>Travel Accommodations</u>			
Please put an X next to the accom	modation/s that your o	rganization will be responsib	ole for (if applicable)
Air Travel Mileage A	Allowance (Based on IR	S rate) Hotel Stay	
_			
Food Allowance (determin	ed by organization)	Registration/Ticket Fee	's Other:
Will the organization make travel	accommodations?		

Note: Speaker reserves the right to request travel for up to two people depending upon the need. If travel accommodations are made by the requesting organization, all reservations must be approved by speaker or designated representative prior to booking.
Other/Comments
Please use this space to express any questions or concerns shared by the requesting organization.
Thank you in advance for your request. Your request will be carefully reviewed and you will be notified of the decision within 2 to 3 business days from the date of submission.
Please send an email to Mwmworldwide@yahoo.com with any questions.
All publications and marketing materials must be reviewed by Elder Monique Williams prior to official distribution.
We look forward to serving you as well as the participants of your event.

## **For Office Use Only**

(Put in X in front of the appropriate responses).

The requested speaker (ENTER NAME OF SPEAKER) has: AGREED to participate in the event listed on this request form. REQUESTED not to participate in the event listed on this request form due to the following reason/s:				
The requested speaker has:				
AGREED to the conditions outlined in this request form.				
AGREED to the conditions outlined in this request form with the exception of:				
Request Approval/Denial Status				
Approval date:				
Denied date:				
Contact person and info to where approved/denied request form was sent:				
Name of Representative approving/denying the request:				
Other:				
Please make checks or money orders payable to: Monique Williams. Thank you!				