



**DEPARTMENT OFFICER/STAFF  
SPEAKER REQUEST FORM**

Please submit this completed form via email to [forms@ohiolegion.com](mailto:forms@ohiolegion.com) or  
mail to **60 Big Run Rd. Delaware, OH 43015**, at least **30 days** prior to the event.

The Department Adjutant and Department Commander will review for authorization. A copy of this document  
will be provided to the Officer or Staff member requested. It is imperative that any written requests be legible if  
handwritten. An alternative may be requested if the primary person cannot attend.

**EVENT INFORMATION**

DATE OF EVENT: \_\_\_/\_\_\_/\_\_\_ DAY OF EVENT: \_\_\_\_\_ DISTRICT: \_\_\_\_\_ POST: \_\_\_\_\_

NAME OF REQUESTOR: \_\_\_\_\_

PHONE: (\_\_\_\_) \_\_\_\_\_ EMAIL: \_\_\_\_\_

OFFICER/STAFF BEING REQUESTED: \_\_\_\_\_

SECONDARY OFFICER/STAFF REQUESTED: \_\_\_\_\_

NAME OF EVENT/FUNCTION: \_\_\_\_\_

LOCATION OF EVENT/FUNCTION: \_\_\_\_\_

SPECIFIC ADDRESS: \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

ARRIVAL TIME: \_\_\_\_\_ EVENT BEGINS: \_\_\_\_\_ EVENT ENDS: \_\_\_\_\_

DRESS CODE FOR EVENT: \_\_\_\_\_

**DETAILS OF EVENT**

WILL THE OFFICER/STAFF BE EXPECTED TO SPEAK (YES/NO): \_\_\_\_\_ HOW LONG: \_\_\_\_\_

TOPIC OF SPEECH: \_\_\_\_\_

WHO IS THE AUDIENCE: \_\_\_\_\_

IS AUDIO/VISUAL PRESENTATION REQUIRED: \_\_\_\_\_

ARE MARKETING MATERIALS REQUIRED (YES/NO) \_\_\_\_\_ IF YES, HOW MANY? \_\_\_\_\_

WHICH ITEMS? \_\_\_\_\_

WILL DISTINGUISHED GUESTS BE IN ATTENDANCE (YES/NO)? \_\_\_\_\_

IF YES, WHO? \_\_\_\_\_

*(PLEASE GIVE NAMES AND TITLES OF ALL WHO SHOULD BE GIVE RECOGNITION BY THE  
OFFICER OR STAFF SUCH AS PDC/PNC, NEC, MAYOR, CONGRESSMAN, AUXILIARY, SAL, etc.)*

ADDITIONAL INFO: \_\_\_\_\_

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_