# Request for Speaker - QLDTSF Team member or *LfL* Student/Alumni

**This form must be submitted at least 3 months prior to the requested event.**

**This request is only for significant VIEW events (eg Area Gala, Zone Conference, IWD (Area or Zone event), Inaugural Meeting of a new Club, a significant decade birthday (25, 30th and 40th)) requiring a Smith Family Team Member and/or *LfL* Student/Alumni.**

Despite all efforts being made, submitting this Request for Speakers Qld form does not guarantee the attendance of TSF Team Members or *LfL* students/Alumni at the event. *Note: TSF Team Members or LfL students/Alumni may not be available for evening or weekend events.*

**Once submitted this request will be reviewed by VIEW National Office together with The Smith Family Qld team. This request is subject to availability and capacity of Smith Family team members and *LfL* students/Alumni to attend your requested event.**

*Insert details in the form below and email it to* *view@thesmithfamily.com.au* *or send it to VIEW National Office, GPO Box 5348 SYDNEY NSW 2001.*

*Please Note: If any requests for speakers are made directly to TSF Team members they will be redirected to this Request for Speakers Qld new process to ensure that all requests are dealt in an equitable and expeditious manner.*

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| **Question** | **Answer** |
| **1. Person Requesting**  *Name and club* |  |
| **2. Contact details** *Phone and email* |  |
| **3. Select the Area requesting Speaker***Select only one*  | 〇 QA 〇 QB 〇 QC |
| **4. Event Type** *Select only one* | 〇 Area Gala 〇 International Women's Day (Area/Zone event) 〇 Zone Conference 〇 Decade Birthday 〇 Club Inaugural meeting (opening a new Club)〇 Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **5. Date of Event**  |  |
| **6. Time of event - Start** |  |
| **7. Time of event - End** |  |
| **8. Location of Event***Include name of venue, address and room names (if required)* |  |
| **9. Provide a short description of your event.***Add details like how many expected attendees, theme, dress code, cost, etc.* |  |
| **10. Who would you like to attend?** *Select only one* | 〇 The Smith Family Team Member 〇 *Learning for Life* Student (accompanied by parent or TSF team member)〇 *Learning for Life* Alumni student 〇 *Learning for Life* student's Parent/Carer〇 Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **11. Specific Speaker request** *Add name/s for specific request* |  |
| **12. Speaker Topic/s and other relevant information** | 1. What would you like the Speaker to talk about, please include approximate speaking time (we recommend allocating 10 mins). 2. Where in the program they will be placed (eg first Speaker for the day or straight after lunch, etc.). 3. What presentation facilities are available at the venue (audio/visual system, screen, microphone, etc.). |