

District 58 Speakers Bureau Application Form

Please complete this form if you are interested in participating in District 58 Speakers Bureau to:

Valerie Brooks-Madden
PO Box 1645
Fountain Inn, SC 29644
(864) 907-3886
Vdb20@charter.net

Name: _____ Address: _____

City: _____ State: _____ Zip code: _____

Home Phone: _____ Business Phone: _____

Email address: _____

Toastmaster club name/Club#/ Location: _____

Occupation & Employer: _____

Accomplishments/Hobbies of Special Interest: _____

Speech # 1

Subject:

Title:

Speaking Time

Summary

Speech # 2

Subject:

Title:

Speaking Time

Summary

Preferred Speaking Times: ___ Day ___ Evening ___ Weekend ___ Flexible

Times Unavailable: _____

Preferred Geographical Areas: _____

Signature: _____ Date: _____