

National Cancer Survivors Day® Speakers Bureau Application

Please complete and return this form, along with your suggested roster listing, to be considered for publication in the NCSD Speakers Bureau Roster.

SPEAKER CONTACT INFORMATION

Name:

Address:

City:

State:

Zip:

Phone #:

Fax #:

E-mail Address:

Web Address:

Do you handle scheduling and other arrangements yourself?

Do you want to have organizations contact your agent to arrange speaking engagements?
If so, please complete the following.

AGENT INFORMATION (if applicable)

Name:

Company:

Address:

City:

State:

Zip:

Phone #:

Fax #:

E-mail Address:

Web Address:

ROSTER LISTING: Please provide your suggested description. Please limit your description to 640 characters including spaces (excluding contact information). The Foundation reserves the right to edit your listing for clarity and brevity; the final version will be sent to you for approval prior to printing the Roster.

RETURN TO: National Cancer Survivors Day Foundation, P.O. Box 682285, Franklin, TN 37068-2285, fax (615) 794-0179, or e-mail info@ncsd.org. If you have questions or need additional information, call (615) 794-3006.