

LaPorte County Communications & Marketing Request



Type of event: _____

Date of event: _____ Start & End Time: _____

Location of Event: _____

Program Area: ANR CD HHS 4-H Youth Development

Where do you want this promoted? Email Newsletter Flyer Facebook Website

We will only take typed or neatly written forms. Please give 2 weeks to put things together. If anything is missing the marketing or communications will not be completed.

Photos after are always welcomed!

Signature

Date

Primary Contact (for possible questions)

Contact Name: _____

Phone #: _____ Email: _____

Other Details

Will there be guest speakers? Yes No

Guest Name: _____

How to register: _____ Registration Deadline: _____

Brief Description: _____

Office Use Only

Date Recieved: _____ Approved: Yes No

Where to post: Email Newsletter Flyer Facebook Website

Date Completed: _____

Completed By: _____