



# Toastmasters Int'l – District 39

www.district39.org

## Speakers Bureau Application

### APPLICANT:

Name \_\_\_\_\_

Organization/Business: \_\_\_\_\_

Profession: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: (     ) \_\_\_\_\_ Fax: (     ) \_\_\_\_\_

E-mail: \_\_\_\_\_ Web site: \_\_\_\_\_

### TOASTMASTERS BACKGROUND:

Current club(s): \_\_\_\_\_

Offices served: \_\_\_\_\_

# yrs: \_\_\_\_ Highest Designation:    CTM  ATM-B  ATM-S  ATM-G  DTM   Year: \_\_\_\_

TLI workshop(s) & year presented: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### LOGISTICS:

Weekdays available:    Mon.  Tues.  Wed.  Thurs.  Fri.

Specify times available:    anytime;  lunch \_\_\_\_\_;  after \_\_\_\_\_;  before \_\_\_\_\_

Weekends:    Sat.  Sun.; Specify time(s): \_\_\_\_\_

Traveling range: \_\_\_\_\_

Honorarium required?    No;  Yes \$ \_\_\_\_\_;  depends: \_\_\_\_\_

Other comments: \_\_\_\_\_  
\_\_\_\_\_

### REFERENCES: (please attach letter of reference from at least one Toastmaster)

Name	How this person knows you?	Phone	E-mail

### COMMENTS & ADDITIONAL INFORMATION:

Please include any additional comments or biographical background below or on a separate sheet.

*Please contact us by fax or e-mail. You will be contacted within 1 week... Thank you!*

susan@xlnetworks.com

District 39 Speakers Bureau Chair: Susan Dakuzaku

fax: (916) 863-5003