



PAO SPEAKER REQUEST FORM

REQUESTING ORGANIZATION(S) _____

ORGANIZATION WEBSITE(S) _____

DATE/TIME OF EVENT _____

REQUESTER _____

TODAY'S DATE _____

FIRST NAME _____ LAST NAME _____

TITLE _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

EMAIL _____

PRIMARY PHONE # _____ CELL PHONE # _____

SPEAKER WILL BE A ☐ KEYNOTE SPEAKER ☐ PART OF A PANEL - NUMBER ON PANEL _____

SERVICE: ☐ NO PREFERENCE ☐ AIR NATIONAL GUARD ☐ ARMY NATIONAL GUARD

STATUS: ☐ NO PREFERENCE ☐ CURRENTLY SERVING ☐ NATIONAL GUARD ALUMNI

RANK: ☐ NO PREFERENCE ☐ GENERAL OFFICER ☐ OFFICER ☐ NON COMMISSIONED OFFICER

OTHER CONSIDERATION OR SPECIAL REQUESTS

EVENT DETAILS & TOPIC

EVENT _____ DATE _____ TIME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

TOPIC _____

ANTICIPATED ATTENDANCE _____ AGE OF AUDIENCE _____

AUDIENCE:

☐ MEMBERS ☐ OPEN TO PUBLIC ☐ COMMUNITY LEADERS ☐ FACULTY ☐ STUDENTS ☐ YOUTH

EVENT LOCATION: ☐ INSIDE ☐ OUTSIDE

TYPE OF EVENT: ☐ BREAKFAST ☐ LUNCH ☐ DINNER ☐ OTHER _____

IS THIS EVENT BEING USED TO RAISE FUNDS? ☐ YES ☐ NO

IF YES, EXPLAIN PURPOSE _____

IS THERE A CHARGE FOR PARTICIPANTS TO ATTEND THIS EVENT? ☐ YES ☐ NO COST? _____

WILL THE MEDIA BE INVITED TO ATTEND THIS EVENT? ☐ YES ☐ NO

IF YES, LIST THOSE ATTENDING:

Requests should be made no later than 30 days before the event start.

Submit all requests to: ng.ar.ararng.mbx.daily-guard@army.mil

