



## Charlotte Sting Appearance Request Form

Request for: \_\_\_\_\_  
(ex.: staff member, coach, etc.)

Completion of this form is a request only, and DOES NOT guarantee an appearance.  
Please type or print. Fill out completely.

**REQUESTS MUST BE SUBMITTED AT LEAST EIGHT WEEKS PRIOR TO SCHEDULED EVENT.**

Organization: \_\_\_\_\_  
Type:        Business        Church        Charity/Non-Profit        School        Civic  
                 Other \_\_\_\_\_

Address: \_\_\_\_\_  
County: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_ Website: \_\_\_\_\_

Brief Description of Organization (purpose/mission). Please include brochure and list of board of directors, if appropriate.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Contact Person: \_\_\_\_\_ Contact Phone Number : \_\_\_\_\_  
E-Mail : \_\_\_\_\_ Cell Phone : \_\_\_\_\_  
Fax : \_\_\_\_\_

Event Name: \_\_\_\_\_  
Event Date: \_\_\_\_\_ Event Time: \_\_\_\_\_  
Event Location: \_\_\_\_\_  
Event Address : \_\_\_\_\_

Event Description (please be specific). What are the goals of the event, and how will our participation support these goals? What are your expectations for our participation, and what do you want the speaker, coach, etc. to do during the event?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



Event Sponsor(s)/Underwriter(s): \_\_\_\_\_

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Audience Size: \_\_\_\_\_ Age Range: \_\_\_\_\_

Recommended Attire: \_\_\_\_\_

Media Invited to Attend Event? \_\_\_\_\_

Do you have a marketing plan to promote the event? If yes, please include it with your request.

Please provide directions to the event from 333 East Trade Street, Charlotte, NC:

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Approximate Drive Time: \_\_\_\_\_

**Please return completed form and all requested supporting information to:**

**Sharbara Ellis  
Community Relations Department  
Charlotte Sting  
333 East Trade Street  
Charlotte, N.C. 28202  
Fax: (704) 688-8733**