Event Request Form



Organization:				
Contact Name:		E-mail:		
Telephone Number:		Fax Number:		
Mailing Address:		City:	ZIP:	
Location/Address of Event (if different from the mailing address above):				
Details: (room number, parking, etc.)				
Topic: (please choose from list)				
Date:	te: Time Start: Time End:		Language:	
Please choose alternative dates/times if we are unable to accommodate your first choice:				
Alternate Date #1: Alternate	Alternate Date #2:		Alternate Date #3:	
Which of the following equipments will be available on site? (not required, but suggested)				
Laptop Projector Screen/Wall Speakers None Other:				
How many people do you expect to attend? (minimum attendance of 10+ required)				
Who will the audience(s) be? Caregivers/Family Members General Community Congregation/Parishioners Senior Citizens				

Would you like us to promote your event to the public? Yes No

Contact Name to be Listed on Publicity:

Contact Telephone Number: (to reserve a space, to request directions, or to ask for additional information)

Please save and return your completed form via email, mail or fax:

Alzheimer's Greater Los Angeles, Attn: Carmen Moore 4221 Wilshire Blvd., Suite 400, Los Angeles CA 90010 Fax to (323) 938-1036 or cmoore@alzgla.org