



LETR Athlete Request Form

(Please write legibly)

General Information

Today's Date: _____ County: _____

Agency Name: _____

Officer Name: _____

Phone Number: _____

Email: _____

Event Information

Event Date(s): _____ Event Time(s): _____

Type of Event: _____

Address of Event: _____

City: _____ State/ Zip: _____

Contact Event Coordinator: _____

Contact Phone: _____ Cell Phone: _____

Contact Email: _____

Event Details: _____

How many audience members expected? _____

Athlete Appearance Request

Global messengers – Trained for public speaking Athlete Ambassadors – General meet and greet

Athlete Ambassador(s) needed: _____

Global messenger needed (*One scheduled per event*): _____ If so, approximately how long: _____

Types of speech: _____ Thanking Donors _____ Recruiting LETR _____ Event Welcome _____ Other _____

Equipment available to use: _____ Audio/Visual _____ Stage _____ Podium _____ Microphone

Athlete Volunteer Duties (Collecting Donations, Talking to Public, etc.): _____