

UF/IFAS Extension Lake County
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 ATTN: Speaker's Bureau
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Master Gardener Volunteer Speaker's Bureau Request Form

INSTRUCTIONS: Complete, sign and return this form to address, email or fax above. See the list of presentations (attached) or request a new subject. You can also request a specific MGV if preferred. There is no charge for Master Gardener Volunteer speakers. Each speaker is a Master Gardener Volunteer (MGV) volunteer. Presentations are forty-five minutes to one hour in length with time allotted for questions. All presentations use Microsoft® PowerPoint. Please allow six weeks advance notice and allow the MGCV speaker half an hour for set up prior to presentation. Individual speakers **may not accept gratuities** or compensation in any form. If you so desire, make honorariums or donations by check payable to the **University of Florida** and give check to the speaker to deliver to the Horticulture Office Associate or mail to the above address.

ORGANIZATION INFORMATION

Organization Name:Date:
 Contact Name:Email:Phone No.:
 Presentation Address:

PRESENTATION INFORMATION

Requested Presentation:
 Primary Date Requested:Alternative Date:Time:
 Anticipated Attendance (8 Minimum):
 MGCV Assigned/requested:

AV EQUIPMENT AVAILABILITY	YES	NO
Screen or smooth white walls?		
HMDI TV With cables?		
Accessible electrical outlets?		
WI-FI Internet access? (please provide the password the day of presentation)		
Media projector?		
Extension cord?		

AFFIRMATIVE ACTION AND SIGNATURE

We understand that the University of Florida/IFAS Extension, Lake County (Organizer of this Speakers Bureau event) and the UF/Institute of Food and Agricultural Sciences (IFAS) is an Equal Opportunity Institution authorized to provide research, educational information and other services to individuals and institutions that function with non-discrimination with respect to race, creed, color, religion, age, disability, sex, sexual orientation, marital status, national origin, political opinions or affiliations. U.S. Department of Agriculture, Cooperative Extension Service, University of Florida, IFAS, Florida A. & M., University Cooperative Extension Programs and Board of County Commissioners cooperating.

Requester's Printed Name:Date:
 Signature:
 or Digital signature

FOR OFFICE USE. NOTES: _____