



**WRJ NORTHEAST DISTRICT  
LINK SPEAKER REQUEST FORM**

DATE OF REQUEST \_\_\_\_\_

SISTERHOOD \_\_\_\_\_

CITY, STATE, ZIP CODE \_\_\_\_\_

YOUR NAME \_\_\_\_\_ POSITION \_\_\_\_\_

SISTERHOOD PRESIDENT (IF NOT PERSON COMPLETING THIS FORM) & CONTACT INFORMATION  
\_\_\_\_\_

HOME PHONE \_\_\_\_\_ ALTERNATE PHONE \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

**CHECK ALL AREAS THAT APPLY TO THIS REQUEST**

DATE FOR ENGAGEMENT \_\_\_\_\_ ALTERNATE DATE \_\_\_\_\_

- GENERAL SISTERHOOD MEETING
- INSTALLATION SERVICE
- DONOR MEETING
- SPECIAL INTEREST MEETING (i.e. Circle of Service, WUPJ)
- SPECIAL MEETING (i.e. 25<sup>TH</sup> /50<sup>TH</sup> anniversary)
- SISTERHOOD SHABBAT SERVICE & SERMON
- OPENING MEETING OF SEASON
- BOARD MEETING (Please indicate time) \_\_\_\_\_

PLEASE INCLUDE ALL NECESSARY DETAILS (for celebration, meeting)

**DETAILS OF LINK SPEAKER REQUEST**

TIME & PLACE OF MEETING \_\_\_\_\_

ATTENDANCE EXPECTED \_\_\_\_\_

1. WHAT SPECIFIC ISSUES WOULD YOU WANT YOUR SPEAKER TO ADDRESS? WHAT IS THE THEME OF YOUR PROGRAM? \_\_\_\_\_  
\_\_\_\_\_

2. PLEASE PROVIDE ANY ADDITIONAL INFORMATION ABOUT YOUR SISTERHOOD THAT YOU FEEL WILL BE HELPFUL FOR YOUR SPEAKER TO KNOW. \_\_\_\_\_  
\_\_\_\_\_