

# **Eat, Drink, Win!®**

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***Endurance Sports Nutrition-2<sup>nd</sup> edition (2007)***

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## **Speaker Request Information Form**

Date of request: \_\_\_\_\_

Group name/event name: \_\_\_\_\_

Contact person/position: \_\_\_\_\_

Phone number: \_\_\_\_\_ Email: \_\_\_\_\_

Topic desired: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Potential date(s): \_\_\_\_\_

Location: \_\_\_\_\_ Time of day: \_\_\_\_\_

AV availability/options: \_\_\_\_\_

Expected audience:

Age group: \_\_\_\_\_ Gender: \_\_\_\_\_ Number: \_\_\_\_\_

Interest/description: \_\_\_\_\_

Prior knowledge of topic: \_\_\_\_\_

Budget: \_\_\_\_\_

**When complete, please fax to: 316.223.5247**

