



# Event Coverage Form

We, \_\_\_\_\_ are requesting coverage of  
(Name of Organization)

\_\_\_\_\_  
(Event)

This event will be held on \_\_\_\_\_, at \_\_\_\_\_ (a.m. or p.m.),  
(Date) (Time)

at \_\_\_\_\_  
(Location)

This event will end at approximately \_\_\_\_\_ (a.m. or p.m.).  
(Time)

The purpose of the event is (Provide a brief description) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\* Requested by (print) \_\_\_\_\_

Contact phone number \_\_\_\_\_

Contact e-mail \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

\* Must be a representative of organization; i.e. president, etc.  
Submit completed form at least two weeks prior to event.  
Submitting this form does not guarantee that the event or meeting will be covered.