



Program Request

Event Name: _____

Committee /Program Sponsor: _____

Chairperson: _____ Date of Event: _____

Requested by: _____ Time of Event: _____ to _____

Room(s) Requested: _____ Expected Number of Attendees: _____

Target Audience: _____

KI Core Value reflected in event: _____

Ticket Price: _____ (Member: _____ Non-Member: _____)

Brief description of event: _____

Will you need Publicity?

EKI

Outside Sign

Interior Poster

Email Flyer

Snail Mailing

Community Listings

Shalom KI

Shabbat Folder

Announcements

Website

Other: _____

