



IWEA Speakers' Bureau

Sign-Up Form

ABOUT SPEAKER

Full Name:

Phone: ()

E-mail Address:

PRESENTATIONS

1. Title/Area:

1-3 sentence description

2. Title/Area:

1-3 sentence description

3. Title/Area:

1-3 sentence description

AVAILABILITY

Please check the time of year when you would be available.

Year round

OR

I am most available during the following months:

January

February

March

April

May

June

July

August

September

October

November

December

Please check the days of the week when you would be available.

Mondays

Tuesdays

Wednesdays

Thursdays

Fridays

Saturdays

Sundays

Please check the most convenient time of day for you.

Mornings

Midday

Afternoons

Evening

Please tell us where you would be willing and able to speak.

Other: (list locations) _____

Anywhere in the State

Prefer northwest Iowa locations

Prefer northeast Iowa locations

Prefer southwest Iowa locations

Prefer southeast Iowa locations

ADDITIONAL INFORMATION

Audio/Video Materials Needed:

Other Comments:

Please return to IWEA, 300 S. 18th Street, Estherville, IA 51334 or info@iowawindenergy.org.
Updates will be accepted at all times.