



Speaker Request Form

Name of Organization: _____

Contact at Organization

Name: _____ Phone: _____

Email: _____

Position in Organization: _____

Topic to be discussed: _____

Date: _____ Time: _____

Location: _____

Length of speech requested:

Number of attendees: _____

Additional information:

Return to:

Evansville Bar Association

401 SE 6th Street, Suite101

Evansville Indiana

Or eba@evvbar.org

*Speakers have volunteered to be listed. They have not been screened. Their listing here does not imply or constitute an endorsement by the Evansville Bar Association. In order to assure the highest quality of your program, you may wish to ask speakers for references before extending an invitation. [For complete disclosure.](#)