

# Tapiwa "Taps" Mugadza (*taps4africa.org*)

## TAPS EVENT REQUEST FORM

Please answer ALL questions

REQUESTS MUST BE SUBMITTED A MINIMUM OF  
**FOUR WEEKS** PRIOR TO YOUR EVENT

Date Request Submitted \_\_\_\_\_

EVENT NAME: \_\_\_\_\_

EVENT LOCATION (COUNTRY/CITY): \_\_\_\_\_

Requestor's Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Event Coordinator's Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Chapter/Organization: \_\_\_\_\_

Chapter/Organization Website: \_\_\_\_\_

| EVENT DATE | TIME / DURATION | DESCRIPTION | ANTICIPATED ATTENDANCE | PROPOSED VENUE REQUESTED |
|------------|-----------------|-------------|------------------------|--------------------------|
|            |                 |             |                        |                          |
|            |                 |             |                        |                          |

TOPIC TO BE ADDRESSED: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

EVENT BUDGET (*Charitable Donation, Travel/Accommodations -- PLEASE be specific*):

| ITEM                | PROPOSED BUDGET | NOTES / CONCERNS / CONSTRAINTS |
|---------------------|-----------------|--------------------------------|
| HONORARIUM/DONATION |                 |                                |
| ACCOMODATIONS       |                 |                                |
| TRAVEL              |                 |                                |
| AUDIO VISUAL        |                 |                                |

Additional Notes: \_\_\_\_\_

Will this event generate media coverage?  No  Yes  
Event Admission:  Free  Charge: Amount \$ \_\_\_\_\_

Will this event raise money for charity?  No  Yes.

EVENT TYPE:  Conference  Panel  
( all that apply)  Lecture  Concert  
 Other \_\_\_\_\_