



## Resource Request Form

Return completed to Eliza May at [emay@komenaustin.org](mailto:emay@komenaustin.org).  
 For volunteer only requests please forward information to [btenaorio@komenaustin.org](mailto:btenaorio@komenaustin.org)

Please select:  Community Outreach- Booth  Speaker  Educational Materials Only  Volunteers  
 Allow 3 weeks for Booth, Speaker & Volunteer requests to ensure the success of recruiting our efforts. Thank you

Please select:  Grantee  Community Profile  Fundraising Opportunity  NA (Donation Requested for >25 sets)

**Part 1. Contact Person's Information (Required from ALL requesting parties)**

Organization Name:	
Contact Name:	Title:
Primary Contact #:	Secondary Contact #:
Email Address:	

**Part 2: Event Information & Logistics (ALL Booth requests will have educational materials; skip Part 4)**

Title/Name of Event:		Expected # of Attendees:
Day & Date:	Time:	Set Up Time:
Event Address/Location:		
City:	Zip Code:	RSVP Date:
<input type="checkbox"/> Indoor	<input type="checkbox"/> Outdoor; canopy/shaded area provided?	<input type="checkbox"/> Yes <input type="checkbox"/> No
% Female:	% Over 40:	% Uninsured:
	% Hispanic:	% African American:
#Table(s):	#Chair(s):	

**Part 3: Presentation Topic (Speaker Request)**

Topic/Focus: (Please select only <b>ONE</b> )	<input type="checkbox"/> Overview: Susan G. Komen for the Cure <i>(5 to 10 minutes covers information about the Organization's mission, local impact, and resources)</i>		
	<input type="checkbox"/> Komen Austin & Breast Health Basics-Intro <i>(30 minutes covers organizational information and basic breast health information)</i>		
	<input type="checkbox"/> Breast Health Basics Comprehensive <i>(60 minutes covers Breast Self Awareness information)</i>		
	<input type="checkbox"/> Race for the Cure® --Teams <i>(Varies in length; covers information about how to fundraise and form a team for the Race)</i>		
	<input type="checkbox"/> Other related topic – Please Specify:		
Presentation Format:	<input type="checkbox"/> PowerPoint Presentation (formal) <input type="checkbox"/> Discussion format Presentation (informal)		
Speaker:	<input type="checkbox"/> Survivor Preferred	<input type="checkbox"/> Male OK	<input type="checkbox"/> Language other than English:

**Part 4: Educational Materials ONLY (For NON-BOOTH requests: Please indicate quantity)- No bags, individual materials only.**

<input type="checkbox"/> Pick up:	When?	By Whom?	Contact #:
<b>Item Name</b>	<b>English/Spanish</b>	<b>Total</b>	<b>Item Name</b>
Breast Health Basics			Young Women: Taking Care of Our Lives
Breast Self-Awareness (BSA) Card			Bookmarks
Mammography: A Picture Can Save a Life			Breast Health Service Brochures
Men Can Get Breast Cancer			Ribbon Pins

Other: (African American, Asian, info, bracelets, rings, etc...)

**Part 5: Volunteer Request (One month notice preferred)**

Number of Volunteers Needed:	Preferred Age:	Language Spoken:	Ethnicity/Gender:
Volunteer Shift Time(s):			
Volunteer Duties:			
Volunteer arrival time and parking instructions:			
Organization Contact and cell # for volunteers:			
Special notes/instructions for volunteers (ie: attire):			