



Eunice Cofie
Miss Black Florida USA® 2008

Speaking/Appearance Request Form

To request Eunice Cofie, Miss Black Florida to make an appearance or speak at your event, please fill out the form below and email to info@missblackflorida.com. Upon receipt of your request, my speaking representative will be in touch with you within 48 business hours. Thank you for your inquiry! I appreciate your interest and look forward to the possibility of working with you.

ORGANIZATION INFORMATION

Name of Organization/Company: _____

Organization/Company Address: _____

City: _____ State: _____ Zip Code: _____

Organization/Company Phone: () _____ Fax: _____

Organization/Company E-Mail: _____

Organization/Company Web Address: _____

Contact Name: _____

Contact Phone: () _____ Contact Fax: _____

Contact E-Mail: _____

EVENT INFORMATION

Program Title: _____

Event Theme: _____

Address where Event will be held: _____ City: _____

Event Date(s): _____ Event Time(s): _____

Event Location: _____ Indoors _____ Outdoors

What is the Event Budget? _____

Please check the type of Event/Appearance:

- | | | |
|---|---|---|
| <input type="checkbox"/> Nonprofit | <input type="checkbox"/> University/College | <input type="checkbox"/> Fashion Show |
| <input type="checkbox"/> Youth Rally/School | <input type="checkbox"/> Corporation | <input type="checkbox"/> Grand Opening |
| <input type="checkbox"/> Trade Association | <input type="checkbox"/> Festival/Parade | <input type="checkbox"/> Charity Program |
| <input type="checkbox"/> Conference | <input type="checkbox"/> Church Event | <input type="checkbox"/> TV/Radio Commercials |
| <input type="checkbox"/> Pageant | <input type="checkbox"/> Banquet | <input type="checkbox"/> Awards Presentation |
| <input type="checkbox"/> Classroom visit | <input type="checkbox"/> Other(Please specify: _____) | |

Please specify event demographics:

Expected Attendance: _____ Seating Capacity: _____
Age Range: _____ Audience Profile: Men Women Youth Professional



Will this event be videotaped? _____ YES _____ NO

Will this event be audio recorded? _____ YES _____ NO

TYPE OF APPEARANCE SERVICE REQUESTED

Please select type of appearance service/role of Miss Black Florida USA: Please provide detail preliminary agenda if available from previous event. Please check as appropriate, and all requested participation must be approved/arranged by Business Manager:

_____ Keynote Address (45-60 minutes)

_____ Panel Guest (30-45 minutes)

_____ Modeling

_____ Emcee

_____ Workshop/Seminar (30 min – 5 hours)

_____ Double Block Booking

_____ TV/Radio (Commercials & Voice Over)

_____ Special Celebrity Guest (sign autographs/mingle)

General description of Miss Black Florida USA's role or elaboration on speaking topics as relating to your organization:

Requested arrival time for Miss Black Florida: _____

Length of appearance: _____ (Hours)

Will there be an autograph session for Miss Black Florida USA? _____ YES _____ NO

Will there be a promotional table for Miss Black Florida USA? _____ YES _____ NO

ATTIRE REQUIREMENTS

Please select appropriate attire selection for event:

_____ Casual

_____ Formal

_____ Business

_____ Cocktail

Crown & Banner requested: _____ YES _____ NO

PUBLICITY AND ADVERTISEMENT

Please select the type of publicity that will be done for event: The sponsoring organization should make any and all arrangements for press interactions with Miss Black Florida USA at your event. Miss Black Florida should be accompanied by her State Traveling Companion in the presence of all media, along with a representative from your organization.

Press coverage arranged: _____ Yes _____ No **Date:** ____/____/____ **Time:** _____ **A.M.**
_____ **P.M.**

Location: _____

Press coverage type: Please check all that apply.

_____ Newspaper

_____ Television

_____ Radio

_____ Other (Please specify: _____)

GENERAL REQUIREMENTS

Miss Black Florida USA requests that the following be provided: Ground Transportation, Air Transportation and/or Hotel Accommodations (if applicable) and Honorarium.

****All fees are due prior to event. No exceptions. Fees are payable by Check, Certified Funds are payable to Eunice N. Coffie and sent to Eunice N. Coffie, Miss Black Florida USA, P.O. Box 7018, Tallahassee, FL 32314. Please see request guidelines document for more information.****

