



Event Promotion Flyer Request
For Approved Matching Funds & Volunteer Service Projects

Date: _____

Chapter Number: _____

Contact Person: _____
(Name & Phone / Email)

Event Title: _____

Event Date: _____

Event Time(s): _____

Event Location: _____

Location Address: _____

Cost/Tickets: _____

Event Contact Person: _____

Complete Event Details: _____

Recipient Name: _____

What is their mission/Why this cause? _____

Would you like printed copies of this flyer? _____ If yes, how many? _____
The cost of printing flyers is \$5 for each 25 printed. The cost will be deducted from your chapter's annual Promotion Grant.

Please direct any questions to Jaylynn Buckley at 800.521.9292 extension 281 or by email at jaylynn.buckley@womanslife.org.