

Consumer Voice Project Booking Form



Engagement Details

Date & Time:

Venue:

Address and/or specific directions?

Audience Details:

Specific areas to be covered (if any):

..... Approximate Length of Talk Required:

Requesting Organisation Details

Organisation Name:

Contact Name:

Email:

Phone Number:

Have you used a Consumer Voice Speaker before? Yes No

How did you hear about the Consumer Voice Project?

Upon completion, please return this form to:
Jhunu Schrapel, Coordinator Consumer Voice Project
49a Orsmond Street, Hindmarsh SA 5007
Ph: 8245 8100 | Fax: 8346 7333 | Email: j.schrapel@rasa.org.au

Office Use Only:

Speaker Used: Evaluation Form sent