

## Speaker Preliminary Invitation Form

### About the Event

Event Title	_____	Date	_____
Description	_____		
Topic	_____		
Location	_____		
Target Audience	_____	No. People	_____
Event Planner	_____		
Contact Info	_____		
	Immediate authority → Pastor <input type="checkbox"/> School Board <input type="checkbox"/> Catholic Health <input type="checkbox"/>		
	Other <input type="checkbox"/>		
Authorized by	_____		
	Name: _____		
	Contact Info: _____		

### About the Speaker/Group

Speaker/Group Name	_____
Resume/CV/Bio	Attached <input type="checkbox"/>
Contact Info	_____
Website	_____
Diocese of Speaker	_____
Contact Info of Diocese	_____

For Office Use Only – Suitability Form

<input type="checkbox"/> Yes <input type="checkbox"/>	_____	_____
No	_____	Date
<i>Nihil Obstat</i>	<input type="checkbox"/> Bishop <input type="checkbox"/> Vicar General <input type="checkbox"/> Chancery	