

Company:

3102 West Euclid Avenue Tampa, Florida 33629

Are you a Non-Profit?

Phone: 813-304-2105 Fax: 813-304-2107 E-Mail: info@KLynergyWellness.com Web: www.KLynergyWellness.com

Y

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Address:				Point of Co	ntact:				
Phone:				Email:					
Website:									
			I	Even	nt I	Req	uest I	Form	
Company:	pany:					Name of Event?			
Date of Event:									
Time of Event:									
Location of Event	:								
Projected Attended	es:								
Mission:									
Request of Service	s (Circle if a	pplicable):							
Massage Seminar			Webinar Speaking Event			Cooking Demo			
Other Information	:								
Vendor Requirements:			Event will provide:				Deadline:		
Signature:				Date Request:					
Office Use Only					Conf	firmed:	Y	N	
Non-Profit Creden	ntials:								
Staff Assigned:				Paid event:					
Additional Notes:									

Please fill out the following form and submit to KLynergy staff at <u>KerriLyn@KLynergyWellness.com</u> for review. A confirmation will be returned to your point of contact for the event. Thank you we look forward to working with you in the future.