



**THE LEAGUE OF WOMEN VOTERS OF THE CITY OF NEW YORK**

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Admin Only\*  
Request Received Date: \_\_\_\_\_  
Request Received by: \_\_\_\_\_  
LWV Speaker: \_\_\_\_\_

**Speaking Engagement/ Debates/ Voter Registration Information Request**

Event Date: \_\_\_\_\_

Type of Volunteer Needed: (Check all that Apply)

**Speaker**

**Debate Moderator**

**Voter Registration**

Organization making the request: \_\_\_\_\_

Site of the Event (Address): \_\_\_\_\_

Street

Suite or Room #

Borough / Town

Zip code

Telephone#: \_\_\_\_\_ Email: \_\_\_\_\_

Person/Contact Making this Request: \_\_\_\_\_

Topic to be Discussed: \_\_\_\_\_

Time the LY V Speaker is to Appear at the Event: \_\_\_\_\_ On the Program: \_\_\_\_\_

Will There Be Other Speakers – please list? \_\_\_\_\_

Size of the expected audience: \_\_\_\_\_

Additional Information: \_\_\_\_\_

How did you hear about us? \_\_\_\_\_

Will there be a Donation made to the LWVNYC?      Yes      No

To Donate online through **PayPal** please click on one of the following options:

(NOTE: Please submit this form before clicking one of the PayPal links below. You will be taken away from this form and sent directly to our PayPal donation page)

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