

EVENT REQUEST FORM 

Requestor Details:

Host Name/Organisation:

Contact Name:

Contact Phone No:

Contact Email:

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Event Details:

Event Type (tick all that apply):

Turban Awareness Talk

Turban Training\*

Location:

Date & Time:

No of People:

Event Description/Details:

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Logistics:

Permission Granted: Y / N

Indoor or Outdoor: I / O

Car Park Space/  
Passes incl: Y / N

IT Equipment Available: Y / N  
(if talk requested)

\* Excluding schools/universities, where turban training is requested, turbans must be arranged and provided by the host. Tick box to confirm acceptance: