**2023 CHAPTER EVENTS FORM**

| **CHAPTER NAME:** |  |
| --- | --- |
| **CHAPTER EVENT TITLE:** |  |
| **EVENT POC NAME & PHONE #:** |  |
| **EVENT POC EMAIL:** |  |
| **EVENT DATE(S) & TIME:***(List start & end dates, and all dates if reoccurring)* | **Date(s):****Start Time:****End Time:** |
| **EVENT LOCATION:***(Please give specific Street, City, State, & Zip)* |  |
| **EVENT SPONSORSHIP POC & Phone #** *(If different from EVENT POC)* |  |
| **WEB LINK TO EVENT REGISTRATION** *(if applicable)***:** |  |
| **WEB LINK TO EVENT PAYMENTS** *(if applicable)***:** |  |
| **IS THIS EVENT OPEN TO NON-CHAPTER ATTENDEES?** | **☐ YES ☐ NO ☐ OTHER:**  |
| **ALLOW ADDING GUESTS:** | **☐ YES ☐ NO ☐ OTHER:**  |
| **SUMMARY OF EVENT:***Please provide a brief summary of the event or training topic.* |  |
| **EVENT CAPACITY:** *(LIST NONE IF NO LIMIT)* |  |
| **FEATURED EVENT, TRAINER/SPEAKER NAME(S)/TITLE(S)::** |  |
| **ADDITIONAL INFORMATION:** |  |
| **SOCIAL MEDIA INFO:***Please list any social media tags you may use for this event. (Example: #SCRetrainer2021)* |  |

* **When submitting this form, please include any registration forms, PDF fliers, event photos (such as a venue/hotel/featured speaker photos) or any additional details so we may post to our social media platforms, advertise on our website & FBINAA App, and/or use in future communications.**
* **During or after your Chapter Event, be sure to email** **jkennedy@fbinaa.org** **any photos you would like to have posted online or in social media.**