



Alyson Seale  
Disability Advocate

alyson@alysonseale.ca  
alysonseale.ca  
604-799-6718

## Information Request Form

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Complete the form below to request a speaking engagement with Alyson Seale. Please return this completed document to [alyson@alysonseale.ca](mailto:alyson@alysonseale.ca)

### CONTACT INFO

First Name:

Last Name:

Title:

Organization:

Phone number:

Email:

Contact person for the event day if different from above

First Name:

Last Name:

Title:

### IN-PERSON or VIRTUAL

Is this a virtual or in-person event:

VIRTUAL

IN-PERSON

*If In-Person, please answer the following questions. If virtual, skip to Event Details.*

Address and room number for the event:

Will you provide a computer and projector:

YES

NO

Are you able to record the presentation:

YES

NO

Please describe information about parking for the event:



*Alyson Seale*  
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## EVENT DETAILS

Please describe your event and/or include a link to a website:

Dates and times requested:

Number of attendees:      0-20              20-50              50-100              100+

Attendee composition (self-advocates, administrators, teachers, parents, etc.):

Estimated budget for speaking engagement:

\$500 - \$1,000

\$1,000 - \$5,000

\$5,000 - \$10,000

\$10,000 +

No budget

What Do You Hope to Accomplish at This Event:



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Indicate Specific Topics as Applicable:  
(Topics are adjusted to the audience and event theme)

Ableism

Universal Design

Inclusion

Disability EDI

What is your preferred presentation format:

Keynote address

60-90 Minute lecture style

1-3 Hour workshop

Panel moderation

Panel participant

Other:

Would you like to include a Q & A:

YES

NO

Any Special Requests or Comments/Other Info we should know:

### HOW DID YOU HEAR

How did you hear about Alyson?

Has Alyson done a speaking engagement with your organization in the past?