Workshop/Seminar Proposal Questionnaire

Thank you for your interest in presenting a workshop/seminar. Please complete this form and return it to dlevy@actorsequity.org.

Information provided will be reviewed and responded to in a timely manner. You may be contacted with questions or for further information.

With your permission and when applicable, workshops/seminars will be shared with members nationwide.

Date:

Workshop/Seminar Title:

Workshop/Seminar Description (*Briefly summarize)*:

What Is the Workshop/Seminar's educational benefit to Equity Members?

Workshop/Seminar Outline *(Lesson plan, what will be covered)*:

Workshop/Seminar Presenter *(Presenter name, contact information and if applicable, membership status)*:

Presenter Biography *(60 word maximum – please attach resume)*:

Additional Presenter Names *(If applicable)*:

Type *(Lecture/Presentation, Panel, Participatory)*:

Length *(e.g. 60, 90, 120 Minutes)*:

Audience *(All Members, Specifically Targeted Members, EMCs)* :

Minimum/Maximum Attendance *(Unlimited or Limited)*:

Target Office City/Cities *(i.e. NYC, Chicago, Los Angeles, Orlando)*:

Target Liaison Area(s):

Proposed Date and Time:

Resources Needed/Requested *(e.g. Staff, Space, Technology, etc.)*:

Room Configuration *(e.g. Classroom, Panel, Round Table)*:

Additional Comments - Specific Needs:

May Actors' Equity Association capture the workshop/seminar for media, broadcast, exhibit or archival purposes?

May Actors' Equity Association present the workshop/seminar simultaneously via live stream in all our offices? *(NYC, Chicago, Los Angeles, Orlando)*:

On behalf of the Membership Education Committee your willingness to be of service is appreciated.

For questions, email dlevy@actorsequity.org.

Equity Use Only: