



Phone: (425) 652-3826  
11410 NE 124th St #528  
Kirkland WA 98034  
www.allianceforrecovery.org  
speakerbureau@allianceforrecovery.org

## SPEAKER APPLICATION/PROFILE

### PROFESSIONAL INFORMATION

Check applicable: Speaker \_\_\_\_\_ Author \_\_\_\_\_ Trainer \_\_\_\_\_ Entertainer \_\_\_\_\_ Media \_\_\_\_\_

Name: \_\_\_\_\_ Credentials: \_\_\_\_\_

Company Name: \_\_\_\_\_

Address 1: \_\_\_\_\_

Address 2: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Country: \_\_\_\_\_

Best Contact Phone: \_\_\_\_\_ Alternative Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_ Alternative Email: \_\_\_\_\_

Website Address: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Assistant's Name: \_\_\_\_\_ Assistant's Phone: \_\_\_\_\_

Assistant's Email: \_\_\_\_\_

Geographic Preferences: \_\_\_\_\_

\_\_\_\_\_

Available Dates/Times: \_\_\_\_\_

\_\_\_\_\_

Unavailable Dates/Times: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Notice Needed For Booking An Engagement: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### PERSONAL INFORMATION

Birthday (Year not needed): \_\_\_\_\_ Recovery Birthday (if applicable): \_\_\_\_\_

Home Address (if different from above):

Address 1: \_\_\_\_\_

Address 2: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Country: \_\_\_\_\_



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BIOGRAPHY

Brief Biography (100 to 200 words; if more room is needed please send in a separate Word document)

Multiple horizontal lines for writing the biography.

Education - Credentials - Training

Form for education and training details, including fields for University/School, Year Graduated, Major/Field of Study, and Certificate/Degree Received.

SPEAKING INFORMATION

Background

Briefly describe your speaking background; include any honors, awards or other recognition: [Blank lines for text]

Audience Focus

Check the audiences you speak to most often:

Checkboxes for various audience categories: Associations, Healthcare/Medical/Pharmaceutical, Treatment Center, Community, Entertainment/Media/Publishing, Legal/Military, Education, Travel/Hospitality/Recreation, Government/Public Sector, Faith-Based, Recovery Group/Twelve Step Group, Non-Profit Organization, and Other.



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Please describe your most popular topic or area of expertise: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please describe your presentation style: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PRESENTATION DESCRIPTIONS**

**Describe the presentations you can give:**

Presentation #1

Type: Keynote \_\_\_\_\_ Seminar \_\_\_\_\_ Workshop \_\_\_\_\_ Entertainment \_\_\_\_\_ Emcee/Host \_\_\_\_\_

Title: \_\_\_\_\_

Description of Presentation: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Target Audience: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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Presentation #2

Select Type: Keynote \_\_\_\_\_ Seminar \_\_\_\_\_ Workshop \_\_\_\_\_ Entertainment \_\_\_\_\_ Emcee/Host \_\_\_\_\_

Title: \_\_\_\_\_

Description of Presentation: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Target Audience: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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Presentation #3

Select Type: Keynote \_\_\_\_\_ Seminar \_\_\_\_\_ Workshop \_\_\_\_\_ Entertainment \_\_\_\_\_ Emcee/Host \_\_\_\_\_

Title: \_\_\_\_\_

Description of presentation: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Target Audience: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

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Presentation #4

Select Type: Keynote \_\_\_\_\_ Seminar \_\_\_\_\_ Workshop \_\_\_\_\_ Entertainment \_\_\_\_\_ Emcee/Host \_\_\_\_\_

Title: \_\_\_\_\_

Description of presentation: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Target Audience: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

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Presentation #5

Select Type: Keynote \_\_\_\_\_ Seminar \_\_\_\_\_ Workshop \_\_\_\_\_ Entertainment \_\_\_\_\_ Emcee/Host \_\_\_\_\_

Title: \_\_\_\_\_

Description of presentation: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Target Audience: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_



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PREVIOUS SPEAKING ENGAGEMENTS

Please list your last five speaking engagement and the fee you received for each:

1. \_\_\_\_\_

Date of engagement: \_\_\_\_\_ Fee: \_\_\_\_\_

2. \_\_\_\_\_

Date of engagement: \_\_\_\_\_ Fee: \_\_\_\_\_

3. \_\_\_\_\_

Date of engagement: \_\_\_\_\_ Fee: \_\_\_\_\_

4. \_\_\_\_\_

Date of engagement: \_\_\_\_\_ Fee: \_\_\_\_\_

5. \_\_\_\_\_

Date of engagement: \_\_\_\_\_ Fee: \_\_\_\_\_

CURRENT FEES

Keynote: Up to \_\_\_\_\_ hours \$ \_\_\_\_\_ USD

Half Day: Up to \_\_\_\_\_ hours \$ \_\_\_\_\_ USD

Full Day: Up to \_\_\_\_\_ hours \$ \_\_\_\_\_ USD

International Fees: \_\_\_\_\_ Other: \_\_\_\_\_

Do you have different fees for the following?

In-Town Programs: Yes \_\_\_\_\_ No \_\_\_\_\_ Non-Profit Organizations: Yes \_\_\_\_\_ No \_\_\_\_\_ Other: Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please explain: \_\_\_\_\_

EXPENSES

What expenses do you typically have? (Check all that apply)

Travel Inclusive \$ \_\_\_\_\_ Flat Fee \$ \_\_\_\_\_

Unrestricted Coach Airfare for one: \_\_\_\_\_



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SPECIAL REQUIREMENTS

Ground Transportation or Lodging: \_\_\_\_\_

Meals, Shipping of Materials, or Other: \_\_\_\_\_

SPEAKERS SUPPORT INFORMATION

Do you have handouts or workbooks? Yes \_\_\_\_\_ No \_\_\_\_\_

Will you provide a master copy at no charge to the client? Yes \_\_\_\_\_ No \_\_\_\_\_

If No, I charge \$ \_\_\_\_\_ per master copy.

AUDIO/VISUAL REQUIREMENTS (Check all that apply)

\_\_\_\_\_ Lavalier Microphone

\_\_\_\_\_ Data Projector

\_\_\_\_\_ DVD Player

\_\_\_\_\_ Overhead Projector

\_\_\_\_\_ Hand-held Microphone

\_\_\_\_\_ Screen

\_\_\_\_\_ VCR & Monitor

\_\_\_\_\_ Podium

\_\_\_\_\_ Whiteboard & Markers

\_\_\_\_\_ CD/Audio Player

Other: \_\_\_\_\_

MULTIMEDIA

Demos available (check applicable): Audio \_\_\_\_\_ DVD/CD \_\_\_\_\_ None \_\_\_\_\_

Description of demos: \_\_\_\_\_

Do you have links to streaming video(s), podcasting or online media where you are featured? If more than one is available, please give a description of each link: \_\_\_\_\_



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PUBLICATIONS

What publications or products do you have available for sale or signing?
(Please send sample products to our sales department.)

Title: \_\_\_\_\_

Price: \$ \_\_\_\_\_ Web Link to Purchase: \_\_\_\_\_

Description of product: \_\_\_\_\_

Title: \_\_\_\_\_

Price: \$ \_\_\_\_\_ Web Link to Purchase: \_\_\_\_\_

Description of product: \_\_\_\_\_

Title: \_\_\_\_\_

Price: \$ \_\_\_\_\_ Web Link to Purchase: \_\_\_\_\_

Description of product: \_\_\_\_\_

Title: \_\_\_\_\_

Price: \$ \_\_\_\_\_ Web Link to Purchase: \_\_\_\_\_

Description of product: \_\_\_\_\_

MISCELLANEOUS INFORMATION

Do you belong to any other Speaker Networks? No \_\_\_\_\_ Yes \_\_\_\_\_

Please list: \_\_\_\_\_

How did you hear about The Alliance for Recovery Speakers Bureau? \_\_\_\_\_