



## PROGRAM REQUEST FORM

Please submit a completed request to [Oklahoma@uli.org](mailto:Oklahoma@uli.org) – Your information will be submitted to our Programs Committee for possible follow-up/inclusion in our annual slate of events.

Contact Name: \_\_\_\_\_

Contact Organization: \_\_\_\_\_

Contact Email: \_\_\_\_\_

Contact Phone: \_\_\_\_\_

Suggested Event Name: \_\_\_\_\_

Suggested Month for Event: \_\_\_\_\_

Suggested Timeframe: \_\_\_\_\_

Suggested Location: \_\_\_\_\_

Event Address (If Known): \_\_\_\_\_

City, State, Zip (If Known): \_\_\_\_\_

**Please provide a short description of your proposed program and how it relates to the ULI Mission & Priorities:**

**Does this event require participants to wear a hard hat; take place on or near the water; or involve any sporting activity?**       Yes       No       Not Sure

**Is there a registration limit?**       Yes       No       Not Sure  
If so, how many? \_\_\_\_\_

**Do you hope to offer CE Credits?**       Yes       No       Maybe, let's talk  
If so, which organization (AIA, AICP, or other)? \_\_\_\_\_

**Is your company willing to sponsor the event?**       Yes       No       Maybe, let's talk