

Chapter \_\_\_\_\_ Event Date \_\_\_\_\_  
mm / dd / yy

## EMAIL FLYER / WEBSITE CONTENT

PCMA Office to receive the flyer / website posting content from: \_\_\_\_\_

Microsoft Word document with required content attached:  Yes  No, will submit by \_\_\_\_\_  
mm / dd / yy

JPG(s) of photos to be posted on the web attached:  Yes  N/A  No, will submit by \_\_\_\_\_  
mm / dd / yy

*Your Microsoft Word event flyer should include the information below. Please be sure your document is laid out exactly the way you wish to see it via email. The PCMA office will make best efforts to see it is formatted as closely as possible to your original document.*

<ul style="list-style-type: none"> <li>· Date (required)</li> <li>· Day of the Event (required)</li> <li>· Event Title(required)</li> <li>· Event Sub-title</li> <li>· Venue Name (required)</li> <li>· Venue Address (required)</li> <li>· Parking (required)</li> </ul>	<ul style="list-style-type: none"> <li>· Member/non member pre-registration &amp; at the door costs (required)</li> <li>· 1) Event Start/End Times, 2) Segment Title, &amp; 3) Speaker Name/Title associated with each activity on the agenda</li> <li style="padding-left: 20px;">Registration (required)</li> <li style="padding-left: 20px;">1<sup>st</sup> Program Segment</li> <li style="padding-left: 20px;">2<sup>nd</sup> Program Segment</li> <li style="padding-left: 20px;">Main Program/Dinner (required)</li> <li>· 2 Paragraph Summary for Chapter Home Page (please send separately if different than the first 2 paragraphs of your main flyer content)</li> <li>· Main Flyer Content</li> </ul>
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## HOTEL GUARANTEE / AV & SPECIAL REQUIREMENTS

Party responsible for calling in the hotel guarantee:  PCMA Office or \_\_\_\_\_

Chapter volunteer responsible for calling in the AV & other special requirements: \_\_\_\_\_

## EVENT REGISTRATION

PCMA Office to email registration reports and name badges to:

- |          |           |
|----------|-----------|
| 1. _____ | 6. _____  |
| 2. _____ | 7. _____  |
| 3. _____ | 8. _____  |
| 4. _____ | 9. _____  |
| 5. _____ | 10. _____ |

PCMA Office to receive post registration packet from: \_\_\_\_\_

PCMA Office to email final event reconciliation report to:

- |          |           |
|----------|-----------|
| 1. _____ | 6. _____  |
| 2. _____ | 7. _____  |
| 3. _____ | 8. _____  |
| 4. _____ | 9. _____  |
| 5. _____ | 10. _____ |