



EVENT/NOTICE/POST FORM

This form must accompany any request for advertising from the MCFN Media and Communications Department.

Type of Request (Please check)	Event <input type="checkbox"/>	Notice <input type="checkbox"/>	Post <input type="checkbox"/>	OTHER <input type="checkbox"/>
Name of Event/Notice/Post:				

PLEASE USE APPLICABLE SECTION ONLY

EVENTS ONLY

Date(s) of Event:		Time of Event:	
End date (for recurring event, this must be provided):	Location of Event:		
	Registration Deadline:		Time of Deadline:
Registration required: Yes <input type="checkbox"/> No <input type="checkbox"/>		Eligibility:	
Refreshments:		What to bring/wear:	
Incentives:		Fees:	
Other Event Details:			
Contact Name:		Contact Information:	
Will you be submitting Event photos to MCD:		YES <input type="checkbox"/>	NO <input type="checkbox"/>
Will you be submitting the story to MCD:		YES <input type="checkbox"/>	NO <input type="checkbox"/>

The deadline for the Newsletter is always the 3rd Friday of each month

NOTICES ONLY (THIS INCLUDES EVENT CANCELLATIONS/OFFICE CLOSURES)

Dates to advertise Notice:		TO	
Do you require the notice to be created by MCD?		Yes: <input type="checkbox"/>	<i>If yes, please complete below</i>
		No: <input type="checkbox"/>	<i>If no, please provide/attach notice info</i>
Notice Information/details:			
Contact Name:		Contact Information:	

POSTS ONLY

Post Link (if applicable):	
Post documents (if applicable, please attach or provide link)	
Other Post Details:	
Contact Name:	Contact Information:
Senior Manager Approval:	Date submitted to MCD: