



Outreach & Engagement Request Form

Name of Organization: _____

Contact Person: _____ Phone: _____ E-Mail: _____

Event Name _____

Event Address/Location: _____

City: _____ State: _____ Zip: _____

All request should be made two weeks prior to event date. An email will be sent within 24-48 hours to confirm.

Event Date (If possible please provide 2 request dates): 1st _____ 2nd _____

Start time of Event: _____ am/pm

End time of Event: _____ am/pm

Number of expected attendees: _____ Target audience _____

Will this event be open to the public? YES / NO

Event Description: _____

Requested information for event (check all that apply):

- General/Current Election Information, Virtual Presentation, Poll Official Recruiting, Voting Machine Demonstration (Indoor Event ONLY), Absentee /Advance Voting, Information Packet Only, Translated Materials(Spanish/Korean), Voter Registration drive information

Are the following available at the event (check all that apply)?

- Event fee? Yes No Cost, Table: Qty Size, Chair: Qty, Electrical outlet

Please submit form two weeks prior to event :

Attn: Outreach/Education Coordinator

4380 Memorial Drive, Suite 300, Decatur, GA 30032 | voterreg@dekalbcountyga.gov | Fax: (404) 298-4038