## **Truman State University Alumni Events Submission Form**



Authorized alumni leaders can use this form to submit official events hosted by Truman's alumni chapters and clubs. All fields marked with an asterisk (\*) must be completed before the University can promote your event.

Select all that	at apply:			
□ Send bulk Please ind (examples: 2 The email date □ Print & ma	weeks before event, 3 week e may have to be changed depe ill invitations/postcards,	ite for sending the email an	nouncement for this event:  communications sent by the Advancement Office. sity (allow 6 weeks)	
*Event Title:				
*Event Date:		*Start Time:	End Time:	
Event Location	:			
* Address				
* City, state,	zip			
* Phone no.	of venue	······································		
Event locat	ion directions (event locat	ion URL recommended):		
*Pricing Details:	Other pricing optic	ons (children, etc.):	Non-member price	
RSVP contact person:				
	s (mark all that apply):	RSVP F	Phone	
	<ul><li>☐ Arizona Chapter</li><li>☐ Chicago Chapter</li><li>☐ Colorado Chapter</li><li>☐ Dallas Chapter</li></ul>	□Iowa Chapter □Kansas City Chapter □Mid-Atlantic Chapter □Mid-Missouri Chapter	□ Northeast Chapter □ Missouri Chapter □ St. Louis Chapter □ Other (please specify):	
	•	lumni, parents, friends, current	Truman students living within 60 miles of	
Special request	s or comments regarding	the event:		
*Name of perso	n submitting information:_			
*Phone		*Email·		

Save a copy of this form for your records, then submit it by one of the following methods:

- EMAIL: alumnievents@truman.edu FAX: (660) 785-7519
- **USPS MAIL:** Truman State University, Office of Advancement, 100 E. Normal, Kirksville, Mo. 63501-4221 **QUESTIONS:** Call the Advancement Office at (800) 452-6678 or (660) 785-4133