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## **Registrar of Voters**

## **Application for Registrar of Voters Speaker**

1. Fill Out Your Contact Information			
Organization:			
Contact Name:			
Contact Title:			
Phone & Fax Numbers:			
Organization Address:			
Email:			
Website:			

2. Provide Your Event Details		
Event Name:		
Event Location:		
Event Date & Time:		
Event Purpose:		
Event Type:		
Audience Size:		

3. Request Your Presentation Details					
Requested Topics:	U Voter Regis	stration Training			
	□ Election Ed	ucation			
	□ Other:				
Presentation Format:					
Presentation Time:					
Presentation Length:					
Equipment Available:	□ Projector	□ Laptop/Computer	□ Other:		
Additional Information:					

## 4. Sign Acknowledgement and Agreement

On behalf of my organization, I acknowledge and agree to the following:

- Submitting an application does not guarantee a speaker. Speaker availability is limited in the weeks leading up to an election.
- My organization is responsible for making all necessary arrangements for the facility, including reservations, facility use agreements, room set-up, insurance, licenses, and permits.
- My organization agrees to submit to the Registrar of Voters for approval any and all printed materials, media releases, or advertising which mention the San Bernardino County Registrar of Voters or contain the Registrar of Voters' logo prior to distribution, broadcast, or publication.

Signature:

Comments:

Date:

	5. Submit Your Application						
	By Email:	communications@sbcountyelections.com					
	By Fax:	(909) 387-2022					
	By Mail or In Person:	San Bernardino County Registrar of Voters 777 E. Rialto Avenue, San Bernardino, CA 92415					
For Office Use Only							
	Final Decision:						
	Staff Member Assigned:						