



The Town of Stratford, Connecticut  
**Office of the Mayor**

2725 Main Street  
Stratford, CT 06615  
Telephone: (203) 385-4001  
Fax: (203) 385-4108

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## EVENT REQUEST FORM

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This form has been created to expedite review of your request.

The Mayor strives to accept as many public appearance requests as possible. This form will assist in planning the Mayor's schedule as far in advance as possible.

Please provide the following information:

**Date of Event:** \_\_\_\_\_

**Time Mayor is Requested to Attend Event:** \_\_\_\_\_

**Type of Event:** \_\_\_\_\_

**Name of Sponsoring Organization:** \_\_\_\_\_

**Requested Role of Mayor:**  Keynote Speaker  Presenting Award

Dais  Social  Other \_\_\_\_\_

**In the event of a conflict with the Mayor's schedule, would you accept a Representative of the Mayor's Administration to participate on his behalf?**

Yes  No

**Your organization's contact person for event (title, mailing address, e-mail address, work phone number, cell phone number and fax number (cell phone number is necessary in case of emergency or other day of event scenarios):**

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**Location of event (including address and on site phone number):**

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**Driving directions:**

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**Parking instructions:**

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**Who from your organization will greet the Mayor and his staff:**

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**Number of people attending (attach guest list if available):**

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**Elected officials or dignitaries (names and office) confirmed to attend event:**

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**Agenda (please attach a formal agenda, if available):**

**Will Mayor be introduced?**  Yes  No

**If yes, who will introduce Mayor?** \_\_\_\_\_

**(Please note: The mayor's bio is available online at [www.townofstratford.com](http://www.townofstratford.com))**

**For your preparations, please note that the Mayor will be accompanied by staff.**

**List of people on the dais (if applicable):**

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**Type of dress (formal, semi-formal, business, casual):**

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**If applicable, requested topic and length of the Mayor's speech/remarks:**

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**If applicable, please attach any pertinent information that may be useful for the Mayor's speech/remarks.**

*Contact Heather Habelka and Ashley Haydu in the Mayor's office if there are any questions relating to press or the Mayor's remarks:*

**Will press be invited?**  Yes  No

**If yes, will your organization/company handle media outreach?**

Yes  No

**If yes, please detail which media outlets will be contacted.**

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**Please provide any additional information that will be helpful to the Mayor:**

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**Submitted by:**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

Please return this form to:

Ashley Haydu and Heather Habelka  
Office of Mayor James R. Miron  
2725 Main Street, Stratford, CT 06615  
ph: (203) 385-4001 fax: (203) 385-4108  
e-Mail: ahaydu@townofstratford.com  
habelka@townofstratford.com

The Office of the Mayor will respond to this request in writing. Until confirmation is received, all requests are considered pending and should not be referenced in invitations or other announcements printed or otherwise. Please allow 10 business days for processing.

The Mayor is happy to provide **proclamations** and **certificates of recognition** for special occasions upon request. Proclamations and certificates of recognition for special events can be prepared even if the Mayor's schedule does not permit him to attend the function. Please refer to the Mayor's Proclamation Request Form and send in with this request.