

**OKLAHOMA BAR ASSOCIATION
ANNUAL MEETING
MEETING REQUEST FORM**

GROUP NAME: _____

CONTACT NAME: _____

ADDRESS: _____

PHONE: _____ FAX: _____

E-MAIL _____

PREFERRED MEETING DATE:

TUESDAY _____ WEDNESDAY _____ THURSDAY _____

PREFERRED MEETING TIME: _____ AM/PM TO _____ AM/PM

TYPE OF MEETING:

- _____ SEMINAR/BUSINESS MEETING
- _____ RECEPTION
- _____ BREAKFAST OR LUNCHEON
- _____ CLE

MEETING ROOM SETUP:

- _____ CLASSROOM STYLE
- _____ THEATER STYLE
- _____ BANQUET STYLE
- _____ CONFERENCE STYLE
- _____ U-SHAPED
- _____ HOLLOW SQUARE
- _____ HALF CIRCLE

- SPECIAL NEEDS:
- _____ WIRED MICROPHONES ----- HOW MANY? _____
 - _____ HANDHELD WIRELESS MICROPHONES ----- HOW MANY? _____
 - _____ LAVALIER WIRELESS MICROPHONES- HOW MANY? _____
 - _____ HEAD TABLE ----- TO SEAT HOW MANY? _____
 - _____ STANDING PODIUM
 - _____ STAGE
 - _____ TABLE TOP PODIUM
 - _____ CONFERENCE PHONE
 - _____ INTERNET ACCESS
 - _____ PROJECTOR AND SCREEN
 - _____ OTHER A/V NEEDS (PLEASE LIST) _____

BEVERAGES: _____ COFFEE _____ TEA _____ SOFT DRINKS _____ ALCOHOL

WILL YOU WANT FOOD? _____ YES** _____ NO

EXPECTED ATTENDANCE: _____

If you have questions about items above, please contact Chris Brumit at 405-416-7040 or e-mail at chrisb@okbar.org.

** Applicable menus will be e-mailed to you.