**City of Chicago’s**  
**Bicycling Ambassadors**  

This request form is also available online at www.bicyclingambassadors.org

**Event Request Form**

- **Event:**
- **Address:**
- **Start Time:**
- **End Time:**
- **Date of Event:**
- **Ward:**
- **Police District #:**
- **Rain Date:**

**How did you learn about us?**

- **Have you done this event before?**
  - Yes
  - No

**Did you issue a press release for this event?**

- **Goals and/or message at the event:**

**Ambassadors should focus on:**

- **A** adult bicycling safety
- **C** commuting, shopping and/or carrying by bike
- **R** helmet fitting
- **C** child bicycling safety
- **M** motorists share the road with bikers
- **S** bike-rack demonstration

**Ambassadors are requested to do:**

- **D** display
- **P** presentation: length ___ minutes
- **N** news media interview

**Have people been encouraged to bring their bicycles to the event?**

- **Y** es
- **N** o

**What non-English languages will people speak at this event?**

- **S** Spanish
- **P** Polish
- **K** Korean
- **C** Chinese
- **O** other ___

### Primary Contact Information

<table>
<thead>
<tr>
<th>Organization</th>
<th>Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>Phone</td>
<td>Address</td>
</tr>
<tr>
<td>Zip</td>
<td>Fax</td>
</tr>
<tr>
<td>E-mail</td>
<td></td>
</tr>
</tbody>
</table>

### On-Site Contact for Event

<table>
<thead>
<tr>
<th>Organization</th>
<th>Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>Phone</td>
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</tr>
</tbody>
</table>

### AGES:

- **1-5**
- **6-8**
- **9-11**
- **12-17**
- **18-24**
- **25-30**
- **31-65**
- **66+**

**No. of people expected:**

**If this is a children’s event, how will they arrive?**

**Others attending**

- **Gov’t Officials:**
  - **N** no
  - **Y** es
  - **W** ho:

- **Police Units:**
  - **N** no
  - **Y** es
  - **W** ho:

- **News Media:**
  - **N** no
  - **Y** es
  - **W** ho:

- **Sponsors:**
  - **N** no
  - **Y** es
  - **W** ho:

- **Other:**

**SITE:**

- **I** indoor
- **O** outdoor

**If outdoor:**

- **O** on grass
- **U** under tent
- **P** on pavement
- **D** on dirt

**You will supply the Ambassadors:**

- **A** a table
- **C** chairs
- **O** other ______________

- **N** no equipment

**If the Ambassadors are assigned a booth or location number, enter here: ___________________**

(Please attach site map if available.)

**Event Agenda – Will there be:**

- **P** presentations
- **E** entertainment
- **I** items for sale
- **G** give-aways

(Attach event agenda or schedule if available.)

**Presentations:**

- **N** no
- **Y** es

**If yes, describe:**

**Entertainment:**

- **N** no
- **Y** es

**If yes, describe:**

**Items for sale:**

- **N** no
- **Y** es

**If yes, describe:**

**Give-aways:**

- **N** no
- **Y** es

**If yes, describe:**

**Ambassador Office use only:**

- **D** date received
- **D** date confirmed
- **B** by whom

- **C** community event
- **A** Ambassador event
- **C** city event
- **S** school
- **P** park

V/05/07