

Please type or print all responses. **Incomplete applications will not be considered.** A downloadable version of the application is available at www.pahumanities.org. Mail your application to: PHC, 325 Chestnut Street, Suite 715, Philadelphia, PA 19106.

1. Host Organization

Mailing Address

City _____ State _____ Zip _____

PA County _____ Phone () _____ Fax () _____

Website _____ **DUNS (Data Universal Numbering System)**

District #: U.S. Congress _____ PA Senate _____ PA House _____

- \$75 application fee for first annual presentation attached. Note this fee is refundable if not awarded a Speaker.**
- \$75 plus \$500 for second annual presentation attached**
- PA Cultural Data Project Report attached**

2. Annual Budget of your organization _____ # of Paid Staff _____

3. Contact Person

Address (if different than above) _____

City _____ State _____ Zip _____

Phone () _____ E-mail _____

Please fill in check box to receive information via e-mail on PHC programs and activities.

4. Presentation requested. **List two Speakers in case your preferred Speaker is not available. Applications that do not list a preferred AND alternate Speaker will not be processed.**

Preferred Speaker/Topic _____

Alternate Speaker/Topic _____

5. Requested date and time of program (Note: applications must be received at least **8 weeks** prior to the date listed)

Preferred Date _____ Preferred Time _____

Alternate Date _____ Alternate Time _____

6. Location of program: **Give the site name and street address, if different from the address in #1.**

Site Name _____

Site Address _____

City _____ State _____ Zip _____

Continued on Next Page

7. Why do you want to host a Commonwealth Speaker? What audience do you seek to reach with this program?

8. Outline how you will use publicity and promotional efforts to attract an audience. What measures will you take to make your program a success?

9. Estimated attendance (*acceptable minimum 25*) _____

10. How did you hear about the Commonwealth Speakers program?

11. You must complete the following section in order to have your application considered.

Note: Applications from organizations with outstanding evaluations or publicity documents will not be processed.

[Organization's name here _____] hereby agrees to fulfill the program responsibilities as described in the 2012-13 Commonwealth Speakers catalog if this application is accepted, including:

- Paying \$75 application fee, plus other expenses outlined
- Opening the program to the general public
- Recruiting as large an audience as possible
- Using PHC's event and publicity guides and crediting PHC and other funders as detailed
- Evaluating the program as required by PHC as detailed in PHC materials
- Providing the Speaker with his or her requested equipment and setup instructions

In addition, the organization listed above warrants and represents that it has sufficient liability for the activities contemplated and shall be responsible for and agrees to indemnify and hold harmless PHC, including its directors, officers, employees, agents and assigns, from damages to property or injuries to any person(s) and other losses, damages, expenses, claims, demands, suits and actions by any party against PHC in connection with the program.

Authorizing Signature _____

Date / / _____