# City of Chicago's Bicycling Ambassadors

This request form is also available on-line at [www.bicyclingambassadors.org](http://www.bicyclingambassadors.org)

**Event Request Form**

<table>
<thead>
<tr>
<th>Event</th>
<th>Date of Event</th>
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<tbody>
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<table>
<thead>
<tr>
<th>Address</th>
<th>Ward</th>
<th>Police District #</th>
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<table>
<thead>
<tr>
<th>Start Time</th>
<th>End Time</th>
<th>Rain Date</th>
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<tbody>
<tr>
<td>A.M.</td>
<td>P.M.</td>
<td>A.M.</td>
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**How did you learn about us?**

- [ ] Yes
- [ ] No

**Have you done this event before?**

- [ ] Yes
- [ ] No

Did you issue a press release for this event?  
- [ ] Yes
- [ ] No

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

**Ambassadors should focus on:**

- [ ] Adult bicycling safety
- [ ] Commuting, shopping and/or carrying by bike
- [ ] Helmet fitting
- [ ] Child bicycling safety
- [ ] Motorists share the road with bikers
- [ ] Bus-rack demonstration

**Ambassadors are requested to do:**

- [ ] Display
- [ ] Presentation: length ______ minutes
- [ ] News media interview

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

- [ ] Yes
- [ ] No

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

- [ ] Spanish
- [ ] Polish
- [ ] Korean
- [ ] Chinese
- [ ] Other ______

**Primary Contact Information**

<table>
<thead>
<tr>
<th>Organization</th>
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<th>Zip</th>
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**On-Site Contact for Event**

<table>
<thead>
<tr>
<th>AGES:</th>
<th>1-5</th>
<th>6-8</th>
<th>9-11</th>
<th>12-17</th>
<th>18-24</th>
<th>25-30</th>
<th>31-65</th>
<th>66+</th>
<th>No. of people expected: ______</th>
</tr>
</thead>
</table>

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

**Others attending**

**Gov't Officials:**  
- [ ] No
- [ ] Yes
  Who: ____________________________

**Police Units:**  
- [ ] No
- [ ] Yes
  Who: ____________________________

**News Media:**  
- [ ] No
- [ ] Yes
  Who: ____________________________

**Sponsors:**  
- [ ] No
- [ ] Yes
  Who: ____________________________

**Other:** ____________________________

**SITE:**  
- [ ] Indoor
- [ ] Outdoor
  If outdoor:  
  - [ ] On grass
  - [ ] Under tent
  - [ ] On pavement
  - [ ] On dirt

**You will supply the Ambassadors:**  
- [ ] Table
- [ ] Chairs
- [ ] Other
  ____________________________________________________________________________

- [ ] 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:**  
(Please attach event agenda or schedule if available.)

**Presentations:**  
- [ ] No
- [ ] Yes
  If yes, describe: ____________________________

**Entertainment:**  
- [ ] No
- [ ] Yes
  If yes, describe: ____________________________

**Items for sale:**  
- [ ] No
- [ ] Yes
  If yes, describe: ____________________________

**Give-aways:**  
- [ ] No
- [ ] Yes
  If yes, describe: ____________________________

**Ambassador Office use only:**

Date received: ______

Date confirmed: ______

By whom: ____________________________

- [ ] Community event
- [ ] Ambassador event
- [ ] City event
- [ ] School
- [ ] Park

V/5/07