Rockford Thunder
Appearance Request Form

Completion of this form indicates a request; it does not guarantee an appearance. Appearance requests must be received a **minimum of ten (10) days prior** to the event to be considered. **Incomplete forms will not be considered.**

Event Date _____

Organization _____

Type o Business o Charity o Church o Civic o School o Other
If Other, Please specify _____

Address _____

City _____ State _____ Zip _____

Telephone # _____ Fax _____

Contact Name _____ Contact Telephone _____

Event Name _____

Event Location _____

Event Description (please be specific; i.e. school assembly, talk, etc) _____

_____

_____

Thunder role/function at Event (i.e. autographs, theme talk, etc.) _____

_____

Audience Size _____ Audience age range _____

Recommended/Suggested Attire _____

Will food/beverages be provided? o yes o no

Are you inviting local media? o yes o no

Payment: Please contact the Thunder for additional information.

Please return completed form to:
Rockford Thunder Pro Fastpitch
Attn: Community Relations/Appearance Requests
202 w. State Street, Suite 100
Rockford, IL 61101