

**Partnership Carson City**  
**(775) 887-2201**



**Presentation Request**

Organization: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Phone No.: \_\_\_\_\_

Email: \_\_\_\_\_

Type of Presentation Requested:

- Parents       Landlords       Hotels / Motels       Other  
 Neighborhoods       Rental Properties       Workplace

Requested Date: \_\_\_\_\_ Time: \_\_\_\_\_

How many persons are expected to attend?

Comments:

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*

**Presentation Confirmation**

- Approved  
 Date Unavailable

Comments:

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*

*Fax request form to (775) 887-2286*