

## Booking Request Form

*Greetings!* Thank you for choosing BLEST Magazine to be your source for promoting your business.

### PLEASE COMPLETE THIS FORM & SEND IT TO:

BLEST Magazine • Attn: Booking Agent • 3780 Old Norcross Rd., Suite 103-327, Duluth, GA 30096  
Email: [info@blestmagazine.com](mailto:info@blestmagazine.com) • Fax: 678.609.1399 • Office: 678.608.1073

Date: \_\_\_\_\_

Dear BLEST Magazine:

This form comes to you as a letter of intent to book the appearance and services of BLEST Magazine's, Editor-in-Chief, Suzianna Jennings. Please complete this form and return via email, fax or by mail. All requests must be prepaid and received at least 2 weeks prior to your event date.

*Please print your information below.*

Company Name: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Title: \_\_\_\_\_

Office #: \_\_\_\_\_ Ext. \_\_\_\_ Tel #: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Event Name: \_\_\_\_\_ Date: \_\_\_\_\_

### SERVICES NEEDED:

Guest Speaker     Event Host     Counseling Session     Conference / Seminar

Other Details: \_\_\_\_\_

Duration: \_\_\_\_ to \_\_\_\_  AM  PM    #Hours \_\_\_\_    #Days \_\_\_\_    #Weekends \_\_\_\_

Minimum Audience Expected: \_\_\_\_\_

Restrictions: \_\_\_\_\_

## BLEST CONTRIBUTION . . .

Get FREE B2B Network Exchange – Resource Guide Listing \*Complimentary Advertising for 1 Year  
Includes: • Company Name, Telephone, City, State & 25 word description of your business.

- Email Address: \_\_\_\_\_ . \_\_\_\_\_
- Link To: www. \_\_\_\_\_ . \_\_\_\_\_

## OTHER INTERESTS . . .

Guest Speaker     Print AD     Banner AD     Event Sponsorship     Advisory Board

\*Download our Media Kit from our website for more details, rates and deadlines.

## FORM OF PAYMENT

Please make all checks payable to BLEST Magazine, Inc. Thank you in advance!

Enclosed Check # \_\_\_\_\_ Expires \_\_\_\_\_



VISA     MC     AE     DISCOVER

Card # \_\_\_\_\_ Expires \_\_\_\_\_ Code \_\_\_\_\_

Name \_\_\_\_\_ Date Signed \_\_\_\_\_

Title \_\_\_\_\_

Authorization Signature \_\_\_\_\_

Name \_\_\_\_\_ Date Signed \_\_\_\_\_

Title \_\_\_\_\_

Authorization Signature \_\_\_\_\_

Name \_\_\_\_\_ Date Signed \_\_\_\_\_

Title \_\_\_\_\_

## TERMS & CONDITIONS

*I have read the information above and give authorization to BLEST Magazine, Inc. to charge my account for return of advertisement selected above. I am in full understanding that my company agrees to compensate the Editor-in-Chief of BLEST Magazine, Inc. for all agreed services mentioned on this form. BLEST reserves the rights to not be liable for any absences due to illness or travel difficulties. BLEST Magazine, Inc. will refund one hundred percent of all payments if cancelled.*