



## Publicity Request

Submitting your request less than 30 days in advance will limit coverage options.

### Event/Subject

#### Brief Description:

Date/Time:

Location:

Target Audience:

Register by date:

#### Purpose of Request:

Promote future event

Inform/Educate

Tell a story

#### Goals:

### Point of Contact for AFN:

First Name:

Last Name:

Email Address:

Telephone:

Unit/Organization:

Today's Date:

### Point of Contact for audience:

Name/rank:

Telephone/email:

### Additional Information:



## **Feedback Form**

### **Before Event:**

1. What is your organization's goal for this event/program? (Please provide numbers: Increase participation by 50%, increase volunteers by 200, etc.)
  
2. What is your definition of success for your event/program?

### **After the Event:**

1. Did you meet your goal? Exceed it? By how much? (Please provide numbers: 40% more participation; only 200 volunteers instead of our goal of 300, etc)
  
2. How do you feel AFN contributed to the results of your event/program?
  
3. Do you have any additional feedback that will help us better serve you or other clients in the future?

**Thank you for your time and feedback!**

\*If unable to "submit", please email form to: [DMA.Kadena.AFN.list.Publicity@mail.mil](mailto:DMA.Kadena.AFN.list.Publicity@mail.mil)