

## Outreach Request Form

### The Arboretum, State Botanical Garden of Kentucky

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

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

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

#### Type of Request

- Community Event
- Classroom Speaker
- Panelist
- Presentation
- Other: \_\_\_\_\_

Name of Event: \_\_\_\_\_

Years in Existence (if applicable): \_\_\_\_\_

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

Event Time (start and end): \_\_\_\_\_

Event Location: \_\_\_\_\_

Total Estimate On-site Attendance: \_\_\_\_\_

Describe what you would like:

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Direct questions and completed forms to Jackie Gallimore, Education Coordinator  
[Jackie.gallimore@uky.edu](mailto:Jackie.gallimore@uky.edu) or (859) 257-9339

#### Office Use Only

Date Received: \_\_\_\_\_ Accepted  Denied  Person Attending: \_\_\_\_\_